NDPERS BOARD MEETING
Agenda

Bismarck Location:
ND Association of Counties
1661 Capitol Way
Fargo Location:
BCBS, 4510 13th Ave SW

July 16, 2009 **Time: 8:30 AM**

I. MINUTES
- A. June 18, 2009

II. RETIREMENT
- A. Job Service QDRO Model – Kathy (Board Action)
- B. Graduated Benefit Option – Rebecca (Board Action)
- C. Investment Report – Sparb (Information)

III. GROUP INSURANCE
- A. BCBS Agreement – Sparb (Board Action)
- B. Tobacco Cessation Grant – Kathy (Board Action)
- C. Wellness Efforts Update – Sparb (Information)
- D. Employer-based Wellness Program Update – Rebecca (Information)
- E. Surplus/Affordability Update – Bryan (Information)

IV. DEFERRED COMPENSATION
- A. Hardship Withdrawal Guidelines/Education – Kathy (Board Action)

V. MISCELLANEOUS
- A. Board Committee Assignments – Sparb (Board Action)
- B. RFP for Experience Study and OPEB – Sparb (Board Action)
- C. Request for Proposal Schedule for 2009-2010 – Sparb (Information)
- D. Consultant Fees – Jim (Information)
- E. SIB Agenda

Any individual requiring an auxiliary aid or service must contact the NDPERS ADA Coordinator at 328-3900, at least 5 business days before the scheduled meeting.

Memorandum

TO: **NDPERS Board**

FROM: **Diane**

DATE: **July 7, 2009**

SUBJECT: **QDRO Model Revisions**
Job Service Retirement Plan

A review of our current operations in conjunction with the development of our new business system has revealed an inconsistency with regard to administration of the QDRO provisions for active and retired members of the Job Service Retirement Plan.

Currently we do not have a QDRO model for retired members of the Job Service plan. Therefore, staff requested that Segal develop a model for these members similar to the PERS Defined Benefit Plan model for retired members.

In addition, staff requests that the Board consider changing the language found under Section V (C) in the active model for Job Service. The current language specifies that in the event the alternate payee dies prior to receipt of benefits that the entire amount due to the alternate payee must revert to the participating member. The change requested specifies that the alternate payee's estate would receive a lump sum payment that is determined based on a percentage of the member's account balance as of the date of divorce plus interest until the distribution is paid. The Board approved a similar change in 2005 for the PERS Defined Benefit Plan QDRO model for active members.

Both models have been reviewed by staff, legal counsel and Segal and are included as attachments 1 and 2 for your review.

Staff Recommendation:

Staff recommends that the Board approve adopting the QDRO model for retired members of the Job Service Retirement Plan and allow the change in the language found under section V (C) in the active model document.

Board Action Requested:

- Approve the adoption of the Job Service Retirement Plan QDRO model for retired members.
- Determine the option to be used in the event the alternate payee dies prior to receipt of benefits.

MODEL QDRO LANGUAGE FOR RETIRED MEMBERS OF THE RETIREMENT PLAN FOR EMPLOYEES OF JOB SERVICE NORTH DAKOTA

Attachment 1

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____,

_____ JUDICIAL DISTRICT

_____,)
Plaintiff,)
)
vs.)
)
_____,)
Defendant.)

QUALIFIED DOMESTIC RELATIONS ORDER

Case No. _____

.....

This Order is intended to meet the requirements of a "Qualified Domestic Relations Order" relating to the Retirement Plan for employees of Job Service North Dakota, hereafter referred to as the "Plan." The Order is an integral part of the judgment entered on **[DATE OF DIVORCE]** granting a divorce to the above-entitled parties. [This Order is also drawn pursuant to the laws of **[STATE IN WHICH DIVORCE OCCURRED]** relating to the equitable distribution of marital property between spouses and former spouses in actions for dissolution of a marriage.] **OR** [This Order is drawn pursuant to the laws **[STATE IN WHICH THE DIVORCE OCCURRED]** relating to the provision of child support to a minor child in actions for dissolution of a marriage.]

BACKGROUND INFORMATION

[MEMBER'S NAME AND SOCIAL SECURITY NUMBER] is the participating member whose last known address is **[MEMBER'S ADDRESS]**. The member's date of birth is **[MEMBER'S D.O.B.]**.

[ALTERNATE PAYEE'S NAME AND SOCIAL SECURITY NUMBER] is the alternate payee whose last known address is **[ALTERNATE PAYEE'S ADDRESS]**. The alternate payee's date of birth is **[ALTERNATE PAYEE'S D.O.B.]**.

The participating member and the alternate payee were married on **[DATE OF MARRIAGE]**.

IT IS HEREBY ORDERED THAT:

I. BENEFITS

NOTE: Distribution of benefits must be based on the member's monthly annuity benefit as opposed to the member's account balance or other estimate. The member's monthly annuity benefit can be obtained by contacting the personnel office of North Dakota Public Employees Retirement System (NDPERS). Please notify NDPERS staff that this information will be used for the purpose of preparing a domestic relations order.

Benefits under the Plan are distributed as follows: (choose one)

1. The alternate payee is awarded **[_____%]** of the member's monthly annuity benefit of [**$**_____] as of **[DATE OF DIVORCE**]. **[OR]**

2. The alternate payee is awarded **[$**_____ **]** of the member's monthly annuity benefit of [**$**_____] as of **[DATE OF DIVORCE]**.

II. TIME OF BENEFIT RECEIPT

The benefits are payable to the alternate payee in the month following receipt of a certified copy of an approved Order by the Plan or Plan administrator as the participating member is currently retired and receiving benefits under the Plan.

III. DURATION OF PAYMENTS TO ALTERNATE PAYEE (Choose one)

NOTE: Choose the appropriate optional language as applicable under the following rules:
- Choose option A if the benefits to the alternate payee are to be paid over the alternate payee's life.
- Choose option B if the benefits to the alternate payee are to be paid over the member's life under the single life annuity option with no surviving spouse annuity benefits upon the member's death OR under one of the plan's term certain and life options with the alternate payee as the survivor beneficiary for continuing annuity payments upon the member's death if the term selected has not expired.

A. OVER LIFE OF THE ALTERNATE PAYEE (Choose one)

1. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 10-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 120 monthly payments, the balance of the 120 monthly payments will be paid to the alternate payee's designated beneficiary on a

monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary. OR

2. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 15-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 180 monthly payments, the balance of the 180 monthly payments will be paid to the alternate payee's designated beneficiary on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary. OR
3. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 20-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 240 monthly payments, the balance of the 240 monthly payments will be paid to the alternate payee's designated beneficiary on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary. OR
4. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a straight life form of payment. Upon the alternate payee's death, no further payments will be made. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary.

Note: The payment calculated on the basis of a straight life form of payment will be actuarially increased or decreased based upon the Plan's assumptions to reflect the life expectancy of the alternate payee. In most instances, actuarial adjustment for a guaranteed period of payment will result in a reduced benefit.

B. OVER THE LIFE OF THE PARTICIPATING MEMBER (Choose one):

1. The payments shall be made to the alternate payee on a monthly basis over the life of the participating member and calculated on the basis of a 10-year guarantee to the alternate payee. Upon the participating member's death, if the alternate payee has not received 120 monthly payments, the balance of the 120 monthly payments will be paid to the alternate payee on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee. OR
2. The payments shall be made to the alternate payee on a monthly basis over the life of the participating member and calculated on the basis of a 15-year guarantee to the alternate payee. Upon the participating member's death, if the alternate payee has not received 180 monthly payments, the balance of the 180 monthly payments will be paid to the alternate

payee on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee. OR

3. The payments shall be made to the alternate payee on a monthly basis over the life of the participating member and calculated on the basis of a 20-year guarantee to the alternate payee. Upon the participating member's death, if the alternate payee has not received 240 monthly payments, the balance of the 240 monthly payments will be paid to the alternate payee on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee. OR
4. The payments shall be made to the alternate payee on a monthly basis over the life of the participating member and calculated on the basis of a straight life form of payment. Upon the participating member's death, no further payments will be made. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee.

Note: In most instances, actuarial adjustment for a guaranteed period of payment will result in a reduced benefit.

IV. LIMITATIONS OF THIS ORDER (Order must reflect all provisions of this section).

A. This Order recognizes the existence of the right of the alternate payee to receive all or a portion of the benefits payable to the participating member as indicated above.

B. Nothing contained in this Order shall be construed to require any Plan or Plan administrator:
   1. To provide to the alternate payee any type or form of benefit or any option not otherwise available to the participating member under the Plan.
   2. To provide the alternate payee benefits, as determined on the basis of actuarial value, not available to the participating member.
   3. To pay any benefits to the alternate payee which are required to be paid to another alternate payee under another order previously determined by the Plan administrator to be a qualified domestic relations order.
   4. To apply the provisions of this Order to disability benefits that the participating member may be entitled to receive.

C. If the alternate payee dies prior to receipt of benefits under this Order, the entire amount that may be due to the alternate payee reverts to the participating member.

D. The benefit enhancements provided by the Plan for service prior to the date of divorce prescribed in Article I. of this order, which are adopted after that date, apply to the alternate payee's portion of benefits under this Order.

E. If the participating member or alternate payee receive any distribution that should not have been paid per this Order, the participating member or alternate payee is designated a constructive

trustee for the amount received and shall immediately notify NDPERS and comply with written instructions as to the distribution of the amount received.

F. Alternate payee is ORDERED to report any payments received on any applicable income tax return in accordance with Internal Revenue Code provisions or regulations in effect at the time any payments are authorized by NDPERS. The Plan is authorized to issue Form 1099R, or other applicable form on any direct payment made to alternate payee. The participating member and alternate payee must comply with the Internal Revenue Code and any applicable regulations.

G. Alternate payee is ORDERED to provide NDPERS prompt written notification of any changes in alternate payee's mailing address. NDPERS shall not be liable for failing to make payments to alternate payee if NDPERS does not have a current mailing address for alternate payee at time of payment.

H. Alternate payee shall furnish a certified copy of this Order to NDPERS.

I. The Court retains jurisdiction to amend this Order so that it will constitute a qualified domestic relations order under the Plan even though all other matters incident to this action or proceeding have been fully and finally adjudicated. If NDPERS determines at any time that changes in the law, the administration of the Plan, or any other circumstances make it impossible to calculate the portion of a distribution awarded to alternate payee by this Order and so notifies the parties, either or both parties shall immediately petition the Court for reformation of the Order.

SIGNED this _____date of _____, 20__.

_____
JUDGE PRESIDING

MODEL QDRO LANGUAGE FOR ACTIVE MEMBERS OF THE RETIREMENT PLAN FOR EMPLOYEES OF JOB SERVICE NORTH DAKOTA

Attachment 2

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____,

_____ JUDICIAL DISTRICT

_____,)
Plaintiff,)
)
)
vs.)
)
_____,)
Defendant.)

QUALIFIED DOMESTIC RELATIONS ORDER

Case No. _____

.....

This Order is intended to meet the requirements of a "Qualified Domestic Relations Order" relating to the Retirement Plan for employees of Job Service North Dakota, hereafter referred to as the "Plan." The Order is an integral part of the judgment entered on **[DATE OF DIVORCE]** granting a divorce to the above-entitled parties. [This Order is also drawn pursuant to the laws of **[STATE IN WHICH DIVORCE OCCURRED]** relating to the equitable distribution of marital property between spouses and former spouses in actions for dissolution of a marriage.] or [This Order is drawn pursuant to the laws **[STATE IN WHICH THE DIVORCE OCCURRED]** relating to the provision of child support to a minor child in actions for dissolution of a marriage.]

BACKGROUND INFORMATION

[MEMBER'S NAME AND SOCIAL SECURITY NUMBER] is the participating member whose last known address is **[MEMBER'S ADDRESS]**. The member's date of birth is **[MEMBER'S D.O.B.]**.

[ALTERNATE PAYEE'S NAME AND SOCIAL SECURITY NUMBER] is the alternate payee whose last known address is **[ALTERNATE PAYEE'S ADDRESS]**. The alternate payee's date of birth is **[ALTERNATE PAYEE'S D.O.B.]**.

The participating member and the alternate payee were married on **[DATE OF MARRIAGE]**.

IT IS HEREBY ORDERED THAT:

I. BENEFITS

NOTE: (Distribution of benefits must be based on the member's accrued monthly benefit as opposed to the member's account balance or other estimate.

The member's accrued monthly benefit can be obtained by contacting the personnel office of North Dakota Public Employees Retirement System (NDPERS). Please notify NDPERS staff that this information will be used for the purpose of preparing a domestic relations order.)

Benefits under the Plan are distributed as follows: (choose one)

1. The alternate payee is awarded **[_____%]** of the member's accrued monthly annuity benefit of [$_____] as of **[DATE OF DIVORCE]. [OR]**

2. The alternate payee is awarded **[$_____]** of the member's accrued monthly annuity benefit of [$_____] as of **[DATE OF DIVORCE]**.

II. TIME OF BENEFIT RECEIPT

Benefits payments to the alternate payee will begin when the participating member retires.

III. DURATION OF PAYMENTS TO ALTERNATE PAYEE (Choose one)

A. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 10-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 120 monthly payments, the balance of the 120 monthly payments will be paid to the alternate payee's designated beneficiary on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary.

B. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 15-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 180 monthly payments, the balance of the 180 monthly payments will be paid to the alternate payee's designated beneficiary on a monthly basis. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary.

C. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a 20-year guarantee. Upon the alternate payee's death, if the alternate payee has not received 240 monthly payments, the balance of the 240 monthly payments will be paid to the alternate payee's designated beneficiary on a monthly basis. Cost-of-living

adjustments as provided for in the Plan will be granted to the alternate payee and the alternate payee's designated beneficiary.

D. The payments shall be made to the alternate payee on a monthly basis over the life of the alternate payee and calculated on the basis of a straight life form of payment. Upon the alternate payee's death, no further payments will be made. Cost-of-living adjustments as provided for in the Plan will be granted to the alternate payee.

IV. MEMBER WITHDRAWS FROM RETIREMENT SYSTEM (Choose one)

A. If the participating member discontinues employment and withdraws the member account in a lump sum, the alternate payee shall receive **[_____%]** of the member's account balance as of **[DATE OF DIVORCE]** accumulated with interest as required by the Plan from the divorce date until the refund is paid. **[OR]**

B. If the participating member discontinues employment and withdraws the member account in a lump sum, the alternate payee shall receive **[$_____]** of the member's account balance as of **[DATE OF DIVORCE]** accumulated with interest as required by the Plan from the divorce date until the refund is paid. (Note: the dollar amount in this option cannot exceed the member's account balance.)

V. LIMITATIONS OF THIS ORDER (Order must reflect all provisions of this Section).

A. This Order recognizes the existence of the right of the alternate payee to receive all or a portion of the benefits payable to the participating member as indicated above.

B. Nothing contained in this Order shall be construed to require any Plan or Plan administrator:

1. To provide to the alternate payee any type or form of benefit or any option not otherwise available to the participating member under the Plan.
2. To provide the alternate payee benefits, as determined on the basis of actuarial value, not available to the participating member.
3. To pay any benefits to the alternate payee which are required to be paid to another alternate payee under another order previously determined by the Plan administrator to be a qualified domestic relations order.
4. To apply the provisions of this Order to disability benefits that the participating member may be entitled to receive.

C. If the alternate payee dies prior to receipt of benefits under this Order, the alternate payee's estate will receive a lump sum payment of **[____%]** of the participating member's account balance as of **[DATE OF DIVORCE]** plus interest until the refund is paid.

D. If the participating member dies prior to retiring, the alternate payee will begin receiving the monthly benefits in Section I of this Order for the duration of time prescribed in Section III of this Order.

E. The benefit enhancements provided by the Plan for service prior to the date of divorce prescribed in Article I of this Order, which are adopted after that date, apply to the alternate payee's portion of benefits under this Order.

F. If the participating member or alternate payee receive any distribution that should not have been paid per this Order, the participating member or alternate payee is designated a constructive trustee for the amount received and shall immediately notify NDPERS and comply with written instructions as to the distribution of the amount received.

G. Alternate payee is ORDERED to report any payments received on any applicable income tax return in accordance with Internal Revenue Code provisions or regulations in effect at the time any payments are authorized by NDPERS. The Plan is authorized to issue Form 1099R, or other applicable form on any direct payment made to alternate payee. The participating member and alternate payee must comply with the Internal Revenue Code and any applicable regulations.

H. Alternate payee is ORDERED to provide NDPERS prompt written notification of any changes in alternate payee's mailing address. NDPERS shall not be liable for failing to make payments to alternate payee if NDPERS does not have a current mailing address for alternate payee at time of payment.

I. Alternate payee shall furnish a certified copy of this Order to NDPERS.

J. The Court retains jurisdiction to amend this Order so that it will constitute a qualified domestic relations order under the Plan even though all other matters incident to this action or proceeding have been fully and finally adjudicated. If NDPERS determines at any time that changes in the law, the administration of the Plan, or any other circumstances make it impossible to calculate the portion of a distribution awarded to alternate payee by this Order and so notifies the parties, either or both parties shall immediately petition the Court for reformation of the Order.

SIGNED this _____date of _____, 20__.

_____
JUDGE PRESIDING

North Dakota
Public Employees Retirement System
400 East Broadway, Suite 505 ● Box 1657
Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 ● EMAIL: NDPERS@state.nd.us ● discovernd.com/NDPERS

Memorandum

TO: NDPERS Board

FROM: Rebecca

DATE: July 1, 2009

SUBJECT: **IMPLEMENTATION OF SB 2153 – GRADUATED BENEFIT**

SB 2153 provides for an actuarially equivalent graduated benefit option with either a one percent or a two percent increase to be applied the first day of January of each year of retirement. Section 14 of the bill provides an effective date of March 1, 2011 for this specific provision. The new provision allows members who are retiring to select the graduated benefit as either a one percent or two percent annual benefit increase. If they make this election, the member's monthly annuity would be actuarially reduced. Members would still be permitted to choose one of the optional forms of payment for their annuity benefit (e.g. the reduced annuity would be paid as a joint and survivor or term certain option). The amount of the reduction will depend on the retiree's age.

SB 2153 amends sections 39-03.1-11 and 54-52-17 of the North Dakota Century Code. These sections allow for the Board to adopt rules to provide for the receipt of retirement benefits in optional forms. This was brought to the board in March as we have begun development in the new business system relative to this provision. Through board action adopted at that time, the following rules for administration were approved and are currently being included in our upcoming administrative rule promulgation:

1. Limit the option to members retiring on or after their Normal Retirement Date as set by statute.
2. Exclude disability and early retirees, beneficiaries of deceased members, and level social security income option.
3. Require that the option be a one-time, irrevocable election that is made at the time of the member's retirement.
4. Exclude the benefit in combination with a PLSO or DNRO benefit option.

Following the March board meeting, Segal was contacted and asked to prepare guidance on the calculation method and the actuarial factor tables for the various plans based upon both a 1% and 2% increase as specified in SB 2153. Attached is a letter from Segal and the factor tables prepared by them.

Staff's Recommendation:

Adopt the tables and method of calculation as provided by Segal.

Board Action Requested:

Approve staff's recommended procedures for implementation of SB 2153.

SEGAL

DIRECT DIAL NUMBER
303-714-9952

THE SEGAL COMPANY
5670 Greenwood Plaza Blvd., Suite 425 Greenwood Village, CO 80111-2499
T 303.714.9900 F 303.714.9990 www.segalco.com

E-MAIL ADDRESS
bramirez@segalco.com

June 5, 2009

Mr. Sparb Collins
Executive Director
North Dakota Public Employees Retirement System
P.O. Box 1657
Bismarck, ND 58502

Re: North Dakota PERS Graduated Benefit Option Factors

Dear Sparb:

We have completed the tables to be used to convert a level benefit to the new graduated benefit option with an automatic annual increase of either 1% or 2%. Note that the member's benefit may first need to be converted to the form elected (100% Joint & Survivor, 20-Year Certain and Life, etc.). Once the benefit is converted to the proper form, one of the attached tables is used to convert it to a graduated benefit.

We will send the factors in an Excel spreadsheet by e-mail to facilitate in using the factors within your computerized system.

The exhibits are as follows:

- Table 1: Single Life Graduated Benefit Option (both 1% and 2% annual increases are shown)
- Table 2a: Main, National Guard and Law Enforcement 50% Joint & Survivor w/Pop-up with a 1% annual Graduated Benefit Option
- Table 2b: Main, National Guard and Law Enforcement 50% Joint & Survivor w/Pop-up with a 2% annual Graduated Benefit Option
- Table 3a: Main, National Guard and Law Enforcement 100% Joint & Survivor w/Pop-up with a 1% annual Graduated Benefit Option
- Table 3b: Main, National Guard and Law Enforcement 100% Joint & Survivor w/Pop-up with a 2% annual Graduated Benefit Option

- Table 4a: Judges and Highway Patrol 50% Joint & Survivor with a 1% annual Graduated Benefit Option
- Table 4b: Judges and Highway Patrol 50% Joint & Survivor with a 2% annual Graduated Benefit Option
- Table 5a: Judges and Highway Patrol 100% Joint & Survivor w/Pop-up with a 1% annual Graduated Benefit Option
- Table 5b: Judges and Highway Patrol 100% Joint & Survivor w/Pop-up with a 2% annual Graduated Benefit Option
- Table 6: 20-Year Certain and Life Graduated Benefit Option (both 1% and 2% annual increases are shown)
- Table 7: 10-Year Certain and Life Graduated Benefit Option (both 1% and 2% annual increases are shown)

We have provided factors for ages 30 to 89, although some of those factors may not be used, since early retirees and disabled retirees are not eligible to elect the Graduated Benefit Option.

All factors were calculated using 8% interest and the 1983 Group Annuity Mortality table with margins blended 50% male and 50% female. We have assumed there are no divorces after a Joint & Survivor annuity is elected.

Please let me know if you have any questions.

Sincerely,

Brad Ramirez, FSA, MAAA, EA
Consulting Actuary

KS/dqm

Table 1 - NDPERS - Healthy Lives
Single Life Graduated Benefit Option

Age	1% Graduated Benefit Option	2% Graduated Benefit Option	Age	1% Graduated Benefit Option	2% Graduated Benefit Option
30	0.8849	0.7739	60	0.9182	0.8395
31	0.8855	0.7752	61	0.9199	0.8427
32	0.8862	0.7766	62	0.9215	0.8459
33	0.8869	0.7780	63	0.9232	0.8492
34	0.8877	0.7795	64	0.9249	0.8525
35	0.8884	0.7810	65	0.9267	0.8559
36	0.8892	0.7826	66	0.9284	0.8593
37	0.8900	0.7843	67	0.9302	0.8627
38	0.8909	0.7860	68	0.9320	0.8662
39	0.8918	0.7878	69	0.9338	0.8697
40	0.8927	0.7896	70	0.9356	0.8732
41	0.8936	0.7915	71	0.9375	0.8768
42	0.8946	0.7934	72	0.9393	0.8803
43	0.8956	0.7954	73	0.9411	0.8839
44	0.8967	0.7975	74	0.9429	0.8874
45	0.8978	0.7996	75	0.9447	0.8909
46	0.8989	0.8018	76	0.9465	0.8945
47	0.9000	0.8040	77	0.9483	0.8979
48	0.9012	0.8064	78	0.9501	0.9014
49	0.9024	0.8088	79	0.9518	0.9048
50	0.9037	0.8112	80	0.9536	0.9082
51	0.9050	0.8137	81	0.9553	0.9115
52	0.9063	0.8163	82	0.9570	0.9148
53	0.9077	0.8190	83	0.9586	0.9181
54	0.9091	0.8217	84	0.9603	0.9214
55	0.9105	0.8245	85	0.9619	0.9246
56	0.9120	0.8274	86	0.9635	0.9277
57	0.9135	0.8303	87	0.9651	0.9309
58	0.9150	0.8333	88	0.9667	0.9340
59	0.9166	0.8364	89	0.9682	0.9370

Interest 8%
Mortality:
Employee 50/50 GA 83 Male/Female w/margin
Form Converting From Life Annuity

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.8824	0.8826	0.8827	0.8828	0.8829	0.8830	0.8831	0.8832	0.8833	0.8834
31	0.8829	0.8830	0.8831	0.8833	0.8834	0.8835	0.8836	0.8837	0.8838	0.8839
32	0.8833	0.8835	0.8836	0.8837	0.8839	0.8840	0.8841	0.8842	0.8843	0.8845
33	0.8838	0.8839	0.8841	0.8842	0.8844	0.8845	0.8846	0.8847	0.8849	0.8850
34	0.8843	0.8844	0.8846	0.8847	0.8849	0.8850	0.8851	0.8853	0.8854	0.8855
35	0.8847	0.8849	0.8851	0.8852	0.8854	0.8855	0.8857	0.8858	0.8860	0.8861
36	0.8852	0.8854	0.8856	0.8857	0.8859	0.8861	0.8862	0.8864	0.8865	0.8867
37	0.8857	0.8859	0.8861	0.8863	0.8864	0.8866	0.8868	0.8869	0.8871	0.8873
38	0.8862	0.8864	0.8866	0.8868	0.8870	0.8872	0.8873	0.8875	0.8877	0.8879
39	0.8868	0.8869	0.8871	0.8873	0.8875	0.8877	0.8879	0.8881	0.8883	0.8885
40	0.8873	0.8875	0.8877	0.8879	0.8881	0.8883	0.8885	0.8887	0.8889	0.8891
41	0.8878	0.8880	0.8882	0.8885	0.8887	0.8889	0.8891	0.8893	0.8895	0.8897
42	0.8884	0.8886	0.8888	0.8890	0.8893	0.8895	0.8897	0.8899	0.8902	0.8904
43	0.8889	0.8891	0.8894	0.8896	0.8898	0.8901	0.8903	0.8906	0.8908	0.8910
44	0.8895	0.8897	0.8900	0.8902	0.8904	0.8907	0.8909	0.8912	0.8914	0.8917

Age	40	41	42	43	44	45	46	47	48	49
30	0.8835	0.8836	0.8837	0.8838	0.8838	0.8839	0.8840	0.8841	0.8841	0.8842
31	0.8840	0.8841	0.8842	0.8843	0.8844	0.8845	0.8846	0.8846	0.8847	0.8848
32	0.8846	0.8847	0.8848	0.8849	0.8850	0.8850	0.8851	0.8852	0.8853	0.8854
33	0.8851	0.8852	0.8853	0.8854	0.8855	0.8856	0.8857	0.8858	0.8859	0.8860
34	0.8857	0.8858	0.8859	0.8860	0.8861	0.8862	0.8863	0.8864	0.8865	0.8866
35	0.8862	0.8864	0.8865	0.8866	0.8868	0.8869	0.8870	0.8871	0.8872	0.8873
36	0.8868	0.8870	0.8871	0.8873	0.8874	0.8875	0.8876	0.8877	0.8878	0.8879
37	0.8874	0.8876	0.8877	0.8879	0.8880	0.8882	0.8883	0.8884	0.8885	0.8886
38	0.8880	0.8882	0.8884	0.8885	0.8887	0.8888	0.8890	0.8891	0.8892	0.8894
39	0.8887	0.8888	0.8890	0.8892	0.8894	0.8895	0.8897	0.8898	0.8899	0.8901
40	0.8893	0.8895	0.8897	0.8899	0.8900	0.8902	0.8904	0.8905	0.8907	0.8908
41	0.8899	0.8902	0.8904	0.8905	0.8907	0.8909	0.8911	0.8913	0.8914	0.8916
42	0.8906	0.8908	0.8910	0.8912	0.8914	0.8916	0.8918	0.8920	0.8922	0.8924
43	0.8913	0.8915	0.8917	0.8919	0.8922	0.8924	0.8926	0.8928	0.8930	0.8932
44	0.8919	0.8922	0.8924	0.8927	0.8929	0.8931	0.8933	0.8936	0.8938	0.8940

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.8842	0.8843	0.8843	0.8844	0.8844	0.8845	0.8845	0.8845	0.8846	0.8846
31	0.8848	0.8849	0.8849	0.8850	0.8850	0.8851	0.8851	0.8852	0.8852	0.8852
32	0.8854	0.8855	0.8856	0.8856	0.8857	0.8857	0.8858	0.8858	0.8858	0.8859
33	0.8861	0.8861	0.8862	0.8862	0.8863	0.8864	0.8864	0.8865	0.8865	0.8865
34	0.8867	0.8868	0.8868	0.8869	0.8870	0.8870	0.8871	0.8871	0.8872	0.8872
35	0.8874	0.8874	0.8875	0.8876	0.8877	0.8877	0.8878	0.8879	0.8879	0.8880
36	0.8880	0.8881	0.8882	0.8883	0.8884	0.8885	0.8885	0.8886	0.8886	0.8887
37	0.8887	0.8889	0.8889	0.8890	0.8891	0.8892	0.8893	0.8893	0.8894	0.8895
38	0.8895	0.8896	0.8897	0.8898	0.8899	0.8900	0.8900	0.8901	0.8902	0.8903
39	0.8902	0.8903	0.8904	0.8906	0.8907	0.8908	0.8908	0.8909	0.8910	0.8911
40	0.8910	0.8911	0.8912	0.8913	0.8915	0.8916	0.8917	0.8918	0.8918	0.8919
41	0.8917	0.8919	0.8920	0.8922	0.8923	0.8924	0.8925	0.8926	0.8927	0.8928
42	0.8925	0.8927	0.8928	0.8930	0.8931	0.8932	0.8934	0.8935	0.8936	0.8937
43	0.8933	0.8935	0.8937	0.8938	0.8940	0.8941	0.8942	0.8944	0.8945	0.8946
44	0.8941	0.8943	0.8945	0.8947	0.8948	0.8950	0.8951	0.8953	0.8954	0.8955

Age	60	61	62	63	64	65	66	67	68	69
30	0.8846	0.8847	0.8847	0.8847	0.8847	0.8847	0.8848	0.8848	0.8848	0.8848
31	0.8853	0.8853	0.8853	0.8853	0.8854	0.8854	0.8854	0.8854	0.8854	0.8855
32	0.8859	0.8859	0.8860	0.8860	0.8860	0.8860	0.8861	0.8861	0.8861	0.8861
33	0.8866	0.8866	0.8867	0.8867	0.8867	0.8867	0.8868	0.8868	0.8868	0.8868
34	0.8873	0.8873	0.8874	0.8874	0.8874	0.8875	0.8875	0.8875	0.8875	0.8875
35	0.8880	0.8880	0.8881	0.8881	0.8882	0.8882	0.8882	0.8882	0.8883	0.8883
36	0.8888	0.8888	0.8888	0.8889	0.8889	0.8890	0.8890	0.8890	0.8890	0.8891
37	0.8895	0.8896	0.8896	0.8897	0.8897	0.8898	0.8898	0.8898	0.8899	0.8899
38	0.8903	0.8904	0.8904	0.8905	0.8905	0.8906	0.8906	0.8907	0.8907	0.8907
39	0.8912	0.8912	0.8913	0.8913	0.8914	0.8914	0.8915	0.8915	0.8915	0.8916
40	0.8920	0.8921	0.8921	0.8922	0.8923	0.8923	0.8924	0.8924	0.8924	0.8925
41	0.8929	0.8930	0.8930	0.8931	0.8932	0.8932	0.8933	0.8933	0.8934	0.8934
42	0.8938	0.8939	0.8939	0.8940	0.8941	0.8941	0.8942	0.8943	0.8943	0.8943
43	0.8947	0.8948	0.8949	0.8950	0.8950	0.8951	0.8952	0.8952	0.8953	0.8953
44	0.8956	0.8957	0.8958	0.8959	0.8960	0.8961	0.8962	0.8962	0.8963	0.8963

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.8848	0.8848	0.8848	0.8848	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
31	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855
32	0.8861	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8868	0.8868	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
34	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876	0.8877
35	0.8883	0.8883	0.8883	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
36	0.8891	0.8891	0.8891	0.8891	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
37	0.8899	0.8899	0.8899	0.8900	0.8900	0.8900	0.8900	0.8900	0.8900	0.8900
38	0.8907	0.8908	0.8908	0.8908	0.8908	0.8908	0.8908	0.8909	0.8909	0.8909
39	0.8916	0.8916	0.8917	0.8917	0.8917	0.8917	0.8917	0.8917	0.8917	0.8918
40	0.8925	0.8925	0.8926	0.8926	0.8926	0.8926	0.8926	0.8926	0.8927	0.8927
41	0.8934	0.8935	0.8935	0.8935	0.8935	0.8936	0.8936	0.8936	0.8936	0.8936
42	0.8944	0.8944	0.8945	0.8945	0.8945	0.8945	0.8945	0.8946	0.8946	0.8946
43	0.8954	0.8954	0.8954	0.8955	0.8955	0.8955	0.8956	0.8956	0.8956	0.8956
44	0.8964	0.8964	0.8965	0.8965	0.8965	0.8966	0.8966	0.8966	0.8966	0.8966

Age	80	81	82	83	84	85	86	87	88	89
30	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
31	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855
32	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
34	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877
35	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
36	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
37	0.8900	0.8900	0.8900	0.8900	0.8900	0.8901	0.8901	0.8901	0.8901	0.8901
38	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909
39	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918
40	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927
41	0.8936	0.8936	0.8936	0.8936	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937
42	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946
43	0.8956	0.8956	0.8956	0.8956	0.8956	0.8956	0.8957	0.8957	0.8957	0.8957
44	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.8900	0.8903	0.8905	0.8908	0.8911	0.8913	0.8916	0.8918	0.8921	0.8924
46	0.8906	0.8909	0.8911	0.8914	0.8917	0.8919	0.8922	0.8925	0.8928	0.8930
47	0.8912	0.8915	0.8917	0.8920	0.8923	0.8926	0.8929	0.8931	0.8934	0.8937
48	0.8918	0.8921	0.8923	0.8926	0.8929	0.8932	0.8935	0.8938	0.8941	0.8944
49	0.8924	0.8927	0.8930	0.8933	0.8935	0.8938	0.8942	0.8945	0.8948	0.8951
50	0.8930	0.8933	0.8936	0.8939	0.8942	0.8945	0.8948	0.8951	0.8955	0.8958
51	0.8936	0.8939	0.8942	0.8945	0.8948	0.8952	0.8955	0.8958	0.8961	0.8965
52	0.8942	0.8945	0.8948	0.8951	0.8955	0.8958	0.8961	0.8965	0.8968	0.8972
53	0.8948	0.8951	0.8955	0.8958	0.8961	0.8965	0.8968	0.8972	0.8975	0.8979
54	0.8954	0.8958	0.8961	0.8964	0.8968	0.8971	0.8975	0.8979	0.8982	0.8986
55	0.8961	0.8964	0.8967	0.8971	0.8974	0.8978	0.8982	0.8985	0.8989	0.8993
56	0.8967	0.8970	0.8974	0.8977	0.8981	0.8985	0.8988	0.8992	0.8996	0.9000
57	0.8973	0.8976	0.8980	0.8984	0.8987	0.8991	0.8995	0.8999	0.9003	0.9007
58	0.8979	0.8983	0.8986	0.8990	0.8994	0.8998	0.9002	0.9006	0.9010	0.9014
59	0.8985	0.8989	0.8992	0.8996	0.9000	0.9004	0.9008	0.9012	0.9017	0.9021

Age	40	41	42	43	44	45	46	47	48	49
45	0.8926	0.8929	0.8931	0.8934	0.8936	0.8939	0.8941	0.8943	0.8946	0.8948
46	0.8933	0.8936	0.8938	0.8941	0.8944	0.8946	0.8949	0.8951	0.8954	0.8956
47	0.8940	0.8943	0.8946	0.8949	0.8951	0.8954	0.8957	0.8959	0.8962	0.8964
48	0.8947	0.8950	0.8953	0.8956	0.8959	0.8962	0.8965	0.8967	0.8970	0.8973
49	0.8954	0.8957	0.8960	0.8963	0.8967	0.8970	0.8973	0.8976	0.8979	0.8981
50	0.8961	0.8964	0.8968	0.8971	0.8974	0.8978	0.8981	0.8984	0.8987	0.8990
51	0.8968	0.8972	0.8975	0.8979	0.8982	0.8986	0.8989	0.8992	0.8996	0.8999
52	0.8975	0.8979	0.8983	0.8986	0.8990	0.8994	0.8997	0.9001	0.9004	0.9007
53	0.8983	0.8986	0.8990	0.8994	0.8998	0.9002	0.9005	0.9009	0.9013	0.9016
54	0.8990	0.8994	0.8998	0.9002	0.9006	0.9010	0.9013	0.9017	0.9021	0.9025
55	0.8997	0.9001	0.9005	0.9009	0.9013	0.9018	0.9022	0.9026	0.9030	0.9034
56	0.9004	0.9009	0.9013	0.9017	0.9021	0.9026	0.9030	0.9034	0.9038	0.9043
57	0.9012	0.9016	0.9020	0.9025	0.9029	0.9034	0.9038	0.9043	0.9047	0.9052
58	0.9019	0.9023	0.9028	0.9032	0.9037	0.9041	0.9046	0.9051	0.9056	0.9060
59	0.9026	0.9030	0.9035	0.9040	0.9044	0.9049	0.9054	0.9059	0.9064	0.9069

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.8950	0.8952	0.8954	0.8956	0.8957	0.8959	0.8961	0.8962	0.8963	0.8965
46	0.8958	0.8960	0.8962	0.8964	0.8966	0.8968	0.8970	0.8972	0.8973	0.8975
47	0.8967	0.8969	0.8971	0.8974	0.8976	0.8978	0.8979	0.8981	0.8983	0.8984
48	0.8975	0.8978	0.8980	0.8983	0.8985	0.8987	0.8989	0.8991	0.8993	0.8995
49	0.8984	0.8987	0.8989	0.8992	0.8994	0.8997	0.8999	0.9001	0.9003	0.9005
50	0.8993	0.8996	0.8999	0.9001	0.9004	0.9006	0.9009	0.9011	0.9013	0.9015
51	0.9002	0.9005	0.9008	0.9011	0.9014	0.9016	0.9019	0.9021	0.9024	0.9026
52	0.9011	0.9014	0.9017	0.9020	0.9023	0.9026	0.9029	0.9032	0.9034	0.9037
53	0.9020	0.9023	0.9027	0.9030	0.9033	0.9036	0.9039	0.9042	0.9045	0.9048
54	0.9029	0.9033	0.9036	0.9040	0.9043	0.9047	0.9050	0.9053	0.9056	0.9059
55	0.9038	0.9042	0.9046	0.9049	0.9053	0.9057	0.9060	0.9064	0.9067	0.9070
56	0.9047	0.9051	0.9055	0.9059	0.9063	0.9067	0.9071	0.9074	0.9078	0.9081
57	0.9056	0.9060	0.9065	0.9069	0.9073	0.9077	0.9081	0.9085	0.9089	0.9092
58	0.9065	0.9069	0.9074	0.9079	0.9083	0.9087	0.9091	0.9096	0.9100	0.9103
59	0.9074	0.9079	0.9083	0.9088	0.9093	0.9097	0.9102	0.9106	0.9111	0.9115

Age	60	61	62	63	64	65	66	67	68	69
45	0.8966	0.8967	0.8968	0.8969	0.8970	0.8971	0.8972	0.8973	0.8973	0.8974
46	0.8976	0.8977	0.8978	0.8979	0.8980	0.8981	0.8982	0.8983	0.8984	0.8984
47	0.8986	0.8987	0.8989	0.8990	0.8991	0.8992	0.8993	0.8994	0.8995	0.8995
48	0.8996	0.8998	0.8999	0.9001	0.9002	0.9003	0.9004	0.9005	0.9006	0.9007
49	0.9007	0.9008	0.9010	0.9011	0.9013	0.9014	0.9015	0.9016	0.9017	0.9018
50	0.9017	0.9019	0.9021	0.9023	0.9024	0.9025	0.9027	0.9028	0.9029	0.9030
51	0.9028	0.9030	0.9032	0.9034	0.9036	0.9037	0.9038	0.9040	0.9041	0.9042
52	0.9039	0.9041	0.9043	0.9045	0.9047	0.9049	0.9050	0.9052	0.9053	0.9054
53	0.9050	0.9053	0.9055	0.9057	0.9059	0.9061	0.9063	0.9064	0.9066	0.9067
54	0.9062	0.9064	0.9067	0.9069	0.9071	0.9073	0.9075	0.9077	0.9078	0.9080
55	0.9073	0.9076	0.9078	0.9081	0.9083	0.9085	0.9088	0.9090	0.9091	0.9093
56	0.9084	0.9087	0.9090	0.9093	0.9096	0.9098	0.9100	0.9102	0.9104	0.9106
57	0.9096	0.9099	0.9102	0.9105	0.9108	0.9111	0.9113	0.9115	0.9118	0.9120
58	0.9107	0.9111	0.9114	0.9117	0.9120	0.9123	0.9126	0.9129	0.9131	0.9133
59	0.9119	0.9122	0.9126	0.9130	0.9133	0.9136	0.9139	0.9142	0.9145	0.9147

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.8974	0.8975	0.8975	0.8976	0.8976	0.8976	0.8977	0.8977	0.8977	0.8977
46	0.8985	0.8986	0.8986	0.8986	0.8987	0.8987	0.8987	0.8988	0.8988	0.8988
47	0.8996	0.8997	0.8997	0.8998	0.8998	0.8998	0.8999	0.8999	0.8999	0.9000
48	0.9007	0.9008	0.9009	0.9009	0.9010	0.9010	0.9010	0.9011	0.9011	0.9011
49	0.9019	0.9020	0.9020	0.9021	0.9022	0.9022	0.9022	0.9023	0.9023	0.9023
50	0.9031	0.9032	0.9032	0.9033	0.9034	0.9034	0.9035	0.9035	0.9035	0.9036
51	0.9043	0.9044	0.9045	0.9046	0.9046	0.9047	0.9047	0.9048	0.9048	0.9049
52	0.9056	0.9057	0.9057	0.9058	0.9059	0.9060	0.9060	0.9061	0.9061	0.9062
53	0.9068	0.9069	0.9070	0.9071	0.9072	0.9073	0.9074	0.9074	0.9075	0.9075
54	0.9081	0.9082	0.9084	0.9085	0.9086	0.9086	0.9087	0.9088	0.9088	0.9089
55	0.9094	0.9096	0.9097	0.9098	0.9099	0.9100	0.9101	0.9102	0.9102	0.9103
56	0.9108	0.9109	0.9111	0.9112	0.9113	0.9114	0.9115	0.9116	0.9117	0.9117
57	0.9121	0.9123	0.9125	0.9126	0.9127	0.9129	0.9130	0.9130	0.9131	0.9132
58	0.9135	0.9137	0.9139	0.9140	0.9142	0.9143	0.9144	0.9145	0.9146	0.9147
59	0.9149	0.9151	0.9153	0.9155	0.9156	0.9158	0.9159	0.9160	0.9161	0.9162

Age	80	81	82	83	84	85	86	87	88	89
45	0.8977	0.8977	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978
46	0.8988	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989
47	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9000	0.9001	0.9001
48	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012
49	0.9024	0.9024	0.9024	0.9024	0.9024	0.9024	0.9024	0.9024	0.9025	0.9025
50	0.9036	0.9036	0.9036	0.9037	0.9037	0.9037	0.9037	0.9037	0.9037	0.9037
51	0.9049	0.9049	0.9049	0.9049	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050
52	0.9062	0.9062	0.9062	0.9063	0.9063	0.9063	0.9063	0.9063	0.9063	0.9063
53	0.9075	0.9076	0.9076	0.9076	0.9076	0.9077	0.9077	0.9077	0.9077	0.9077
54	0.9089	0.9090	0.9090	0.9090	0.9090	0.9091	0.9091	0.9091	0.9091	0.9091
55	0.9103	0.9104	0.9104	0.9104	0.9105	0.9105	0.9105	0.9105	0.9105	0.9105
56	0.9118	0.9118	0.9119	0.9119	0.9119	0.9119	0.9120	0.9120	0.9120	0.9120
57	0.9133	0.9133	0.9133	0.9134	0.9134	0.9134	0.9135	0.9135	0.9135	0.9135
58	0.9148	0.9148	0.9149	0.9149	0.9149	0.9150	0.9150	0.9150	0.9150	0.9151
59	0.9163	0.9164	0.9164	0.9165	0.9165	0.9165	0.9166	0.9166	0.9166	0.9166

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.8991	0.8995	0.8999	0.9002	0.9006	0.9010	0.9015	0.9019	0.9023	0.9028
61	0.8997	0.9001	0.9005	0.9009	0.9013	0.9017	0.9021	0.9026	0.9030	0.9035
62	0.9003	0.9007	0.9010	0.9014	0.9019	0.9023	0.9027	0.9032	0.9037	0.9041
63	0.9008	0.9012	0.9016	0.9020	0.9024	0.9029	0.9033	0.9038	0.9043	0.9048
64	0.9014	0.9018	0.9022	0.9026	0.9030	0.9035	0.9039	0.9044	0.9049	0.9054
65	0.9019	0.9023	0.9027	0.9031	0.9036	0.9040	0.9045	0.9050	0.9055	0.9060
66	0.9024	0.9028	0.9032	0.9036	0.9041	0.9046	0.9050	0.9055	0.9060	0.9066
67	0.9029	0.9033	0.9037	0.9041	0.9046	0.9051	0.9055	0.9061	0.9066	0.9071
68	0.9033	0.9037	0.9041	0.9046	0.9051	0.9055	0.9060	0.9065	0.9071	0.9076
69	0.9037	0.9041	0.9046	0.9050	0.9055	0.9060	0.9065	0.9070	0.9076	0.9081
70	0.9041	0.9045	0.9049	0.9054	0.9059	0.9064	0.9069	0.9074	0.9080	0.9086
71	0.9044	0.9048	0.9053	0.9058	0.9063	0.9068	0.9073	0.9078	0.9084	0.9090
72	0.9047	0.9051	0.9056	0.9061	0.9066	0.9071	0.9076	0.9082	0.9088	0.9094
73	0.9050	0.9054	0.9059	0.9064	0.9069	0.9074	0.9079	0.9085	0.9091	0.9097
74	0.9052	0.9056	0.9061	0.9066	0.9071	0.9077	0.9082	0.9088	0.9094	0.9100

Age	40	41	42	43	44	45	46	47	48	49
60	0.9033	0.9037	0.9042	0.9047	0.9052	0.9057	0.9062	0.9067	0.9072	0.9077
61	0.9039	0.9044	0.9049	0.9054	0.9060	0.9065	0.9070	0.9075	0.9081	0.9086
62	0.9046	0.9051	0.9056	0.9062	0.9067	0.9072	0.9078	0.9083	0.9089	0.9094
63	0.9053	0.9058	0.9063	0.9068	0.9074	0.9079	0.9085	0.9091	0.9096	0.9102
64	0.9059	0.9064	0.9070	0.9075	0.9081	0.9087	0.9092	0.9098	0.9104	0.9110
65	0.9065	0.9071	0.9076	0.9082	0.9088	0.9093	0.9099	0.9105	0.9112	0.9118
66	0.9071	0.9077	0.9082	0.9088	0.9094	0.9100	0.9106	0.9112	0.9119	0.9125
67	0.9077	0.9082	0.9088	0.9094	0.9100	0.9106	0.9113	0.9119	0.9126	0.9132
68	0.9082	0.9088	0.9094	0.9100	0.9106	0.9112	0.9119	0.9126	0.9132	0.9139
69	0.9087	0.9093	0.9099	0.9105	0.9112	0.9118	0.9125	0.9132	0.9139	0.9146
70	0.9092	0.9098	0.9104	0.9110	0.9117	0.9124	0.9130	0.9137	0.9145	0.9152
71	0.9096	0.9102	0.9108	0.9115	0.9122	0.9129	0.9136	0.9143	0.9150	0.9158
72	0.9100	0.9106	0.9113	0.9119	0.9126	0.9133	0.9140	0.9148	0.9155	0.9163
73	0.9103	0.9110	0.9116	0.9123	0.9130	0.9137	0.9145	0.9152	0.9160	0.9168
74	0.9106	0.9113	0.9120	0.9127	0.9134	0.9141	0.9149	0.9156	0.9164	0.9172

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.9083	0.9088	0.9093	0.9098	0.9103	0.9107	0.9112	0.9117	0.9121	0.9126
61	0.9091	0.9097	0.9102	0.9107	0.9112	0.9117	0.9122	0.9127	0.9132	0.9137
62	0.9100	0.9105	0.9111	0.9116	0.9122	0.9127	0.9132	0.9138	0.9143	0.9148
63	0.9108	0.9114	0.9120	0.9125	0.9131	0.9137	0.9142	0.9148	0.9153	0.9159
64	0.9116	0.9122	0.9128	0.9134	0.9140	0.9146	0.9152	0.9158	0.9164	0.9169
65	0.9124	0.9130	0.9137	0.9143	0.9149	0.9155	0.9162	0.9168	0.9174	0.9180
66	0.9132	0.9138	0.9145	0.9151	0.9158	0.9164	0.9171	0.9177	0.9184	0.9190
67	0.9139	0.9146	0.9153	0.9159	0.9166	0.9173	0.9180	0.9187	0.9193	0.9200
68	0.9146	0.9153	0.9160	0.9167	0.9174	0.9181	0.9188	0.9195	0.9202	0.9209
69	0.9153	0.9160	0.9167	0.9175	0.9182	0.9189	0.9197	0.9204	0.9211	0.9219
70	0.9159	0.9167	0.9174	0.9182	0.9189	0.9197	0.9205	0.9212	0.9220	0.9228
71	0.9165	0.9173	0.9181	0.9188	0.9196	0.9204	0.9212	0.9220	0.9228	0.9236
72	0.9171	0.9179	0.9187	0.9195	0.9203	0.9211	0.9219	0.9228	0.9236	0.9244
73	0.9176	0.9184	0.9192	0.9200	0.9209	0.9217	0.9226	0.9235	0.9243	0.9252
74	0.9180	0.9189	0.9197	0.9206	0.9215	0.9223	0.9232	0.9241	0.9250	0.9259

Age	60	61	62	63	64	65	66	67	68	69
60	0.9130	0.9134	0.9138	0.9142	0.9146	0.9149	0.9152	0.9155	0.9158	0.9161
61	0.9141	0.9146	0.9150	0.9154	0.9158	0.9162	0.9165	0.9169	0.9172	0.9175
62	0.9153	0.9157	0.9162	0.9166	0.9171	0.9175	0.9178	0.9182	0.9185	0.9189
63	0.9164	0.9169	0.9174	0.9178	0.9183	0.9187	0.9191	0.9195	0.9199	0.9202
64	0.9175	0.9180	0.9185	0.9190	0.9195	0.9200	0.9204	0.9209	0.9212	0.9216
65	0.9186	0.9191	0.9197	0.9202	0.9207	0.9212	0.9217	0.9222	0.9226	0.9230
66	0.9196	0.9202	0.9208	0.9214	0.9219	0.9225	0.9230	0.9235	0.9239	0.9244
67	0.9206	0.9213	0.9219	0.9225	0.9231	0.9237	0.9242	0.9247	0.9252	0.9257
68	0.9216	0.9223	0.9230	0.9236	0.9242	0.9248	0.9254	0.9260	0.9265	0.9270
69	0.9226	0.9233	0.9240	0.9247	0.9253	0.9260	0.9266	0.9272	0.9278	0.9283
70	0.9235	0.9243	0.9250	0.9257	0.9264	0.9271	0.9277	0.9284	0.9290	0.9296
71	0.9244	0.9252	0.9259	0.9267	0.9274	0.9282	0.9289	0.9295	0.9302	0.9308
72	0.9252	0.9261	0.9269	0.9277	0.9284	0.9292	0.9299	0.9306	0.9313	0.9320
73	0.9260	0.9269	0.9277	0.9286	0.9294	0.9302	0.9310	0.9317	0.9324	0.9332
74	0.9268	0.9277	0.9286	0.9294	0.9303	0.9311	0.9319	0.9327	0.9335	0.9343

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
60	0.9163	0.9165	0.9168	0.9169	0.9171	0.9173	0.9174	0.9175	0.9177	0.9178
61	0.9177	0.9180	0.9182	0.9184	0.9186	0.9188	0.9189	0.9191	0.9192	0.9193
62	0.9191	0.9194	0.9197	0.9199	0.9201	0.9203	0.9205	0.9206	0.9208	0.9209
63	0.9206	0.9209	0.9211	0.9214	0.9216	0.9218	0.9220	0.9222	0.9224	0.9225
64	0.9220	0.9223	0.9226	0.9229	0.9231	0.9234	0.9236	0.9238	0.9240	0.9241
65	0.9234	0.9237	0.9241	0.9244	0.9247	0.9249	0.9252	0.9254	0.9256	0.9257
66	0.9248	0.9252	0.9255	0.9259	0.9262	0.9265	0.9267	0.9270	0.9272	0.9274
67	0.9261	0.9266	0.9270	0.9273	0.9277	0.9280	0.9283	0.9285	0.9288	0.9290
68	0.9275	0.9280	0.9284	0.9288	0.9291	0.9295	0.9298	0.9301	0.9304	0.9306
69	0.9288	0.9293	0.9298	0.9302	0.9306	0.9310	0.9313	0.9317	0.9319	0.9322
70	0.9301	0.9307	0.9312	0.9316	0.9321	0.9325	0.9328	0.9332	0.9335	0.9338
71	0.9314	0.9320	0.9325	0.9330	0.9335	0.9339	0.9343	0.9347	0.9351	0.9354
72	0.9326	0.9332	0.9338	0.9344	0.9349	0.9354	0.9358	0.9362	0.9366	0.9369
73	0.9338	0.9345	0.9351	0.9357	0.9362	0.9367	0.9372	0.9377	0.9381	0.9385
74	0.9350	0.9357	0.9363	0.9369	0.9375	0.9381	0.9386	0.9391	0.9396	0.9400

Age	80	81	82	83	84	85	86	87	88	89
60	0.9178	0.9179	0.9180	0.9180	0.9181	0.9181	0.9182	0.9182	0.9182	0.9182
61	0.9194	0.9195	0.9196	0.9196	0.9197	0.9197	0.9198	0.9198	0.9198	0.9199
62	0.9210	0.9211	0.9212	0.9213	0.9213	0.9214	0.9214	0.9215	0.9215	0.9215
63	0.9226	0.9227	0.9228	0.9229	0.9230	0.9230	0.9231	0.9231	0.9232	0.9232
64	0.9243	0.9244	0.9245	0.9246	0.9247	0.9247	0.9248	0.9248	0.9249	0.9249
65	0.9259	0.9260	0.9261	0.9263	0.9263	0.9264	0.9265	0.9265	0.9266	0.9266
66	0.9275	0.9277	0.9278	0.9279	0.9280	0.9281	0.9282	0.9283	0.9283	0.9284
67	0.9292	0.9293	0.9295	0.9296	0.9297	0.9298	0.9299	0.9300	0.9301	0.9301
68	0.9308	0.9310	0.9312	0.9313	0.9315	0.9316	0.9317	0.9318	0.9318	0.9319
69	0.9324	0.9327	0.9328	0.9330	0.9332	0.9333	0.9334	0.9335	0.9336	0.9337
70	0.9341	0.9343	0.9345	0.9347	0.9349	0.9350	0.9351	0.9352	0.9353	0.9354
71	0.9357	0.9359	0.9362	0.9364	0.9366	0.9367	0.9369	0.9370	0.9371	0.9372
72	0.9373	0.9375	0.9378	0.9380	0.9382	0.9384	0.9386	0.9387	0.9389	0.9390
73	0.9388	0.9391	0.9394	0.9397	0.9399	0.9401	0.9403	0.9405	0.9406	0.9407
74	0.9403	0.9407	0.9410	0.9413	0.9415	0.9418	0.9420	0.9422	0.9423	0.9424

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.9053	0.9058	0.9063	0.9068	0.9073	0.9079	0.9084	0.9090	0.9096	0.9102
76	0.9055	0.9059	0.9064	0.9069	0.9075	0.9080	0.9086	0.9092	0.9098	0.9104
77	0.9055	0.9060	0.9065	0.9070	0.9076	0.9081	0.9087	0.9093	0.9100	0.9106
78	0.9056	0.9061	0.9066	0.9071	0.9076	0.9082	0.9088	0.9094	0.9101	0.9107
79	0.9056	0.9061	0.9066	0.9071	0.9077	0.9082	0.9088	0.9095	0.9101	0.9108
80	0.9055	0.9060	0.9065	0.9071	0.9076	0.9082	0.9088	0.9095	0.9101	0.9108
81	0.9054	0.9059	0.9065	0.9070	0.9076	0.9082	0.9088	0.9094	0.9101	0.9108
82	0.9053	0.9058	0.9064	0.9069	0.9075	0.9081	0.9087	0.9094	0.9100	0.9107
83	0.9051	0.9057	0.9062	0.9068	0.9074	0.9080	0.9086	0.9093	0.9099	0.9107
84	0.9050	0.9055	0.9060	0.9066	0.9072	0.9078	0.9085	0.9091	0.9098	0.9105
85	0.9047	0.9053	0.9058	0.9064	0.9070	0.9076	0.9083	0.9089	0.9096	0.9104
86	0.9045	0.9050	0.9056	0.9061	0.9068	0.9074	0.9080	0.9087	0.9094	0.9102
87	0.9042	0.9047	0.9053	0.9059	0.9065	0.9071	0.9078	0.9085	0.9092	0.9099
88	0.9038	0.9044	0.9049	0.9055	0.9062	0.9068	0.9075	0.9082	0.9089	0.9097
89	0.9035	0.9040	0.9046	0.9052	0.9058	0.9065	0.9072	0.9079	0.9086	0.9093

Age	40	41	42	43	44	45	46	47	48	49
75	0.9109	0.9116	0.9122	0.9130	0.9137	0.9144	0.9152	0.9160	0.9168	0.9176
76	0.9111	0.9118	0.9125	0.9132	0.9140	0.9147	0.9155	0.9163	0.9171	0.9180
77	0.9113	0.9120	0.9127	0.9134	0.9142	0.9150	0.9158	0.9166	0.9174	0.9183
78	0.9114	0.9121	0.9128	0.9136	0.9143	0.9151	0.9160	0.9168	0.9177	0.9185
79	0.9115	0.9122	0.9129	0.9137	0.9145	0.9153	0.9161	0.9170	0.9178	0.9187
80	0.9115	0.9122	0.9130	0.9138	0.9146	0.9154	0.9162	0.9171	0.9180	0.9189
81	0.9115	0.9122	0.9130	0.9138	0.9146	0.9154	0.9163	0.9172	0.9181	0.9190
82	0.9115	0.9122	0.9130	0.9138	0.9146	0.9155	0.9163	0.9172	0.9182	0.9191
83	0.9114	0.9121	0.9129	0.9137	0.9146	0.9154	0.9163	0.9172	0.9182	0.9191
84	0.9113	0.9120	0.9128	0.9137	0.9145	0.9154	0.9163	0.9172	0.9182	0.9191
85	0.9111	0.9119	0.9127	0.9135	0.9144	0.9153	0.9162	0.9171	0.9181	0.9191
86	0.9109	0.9117	0.9125	0.9134	0.9142	0.9151	0.9161	0.9170	0.9180	0.9190
87	0.9107	0.9115	0.9123	0.9132	0.9141	0.9150	0.9159	0.9169	0.9179	0.9189
88	0.9104	0.9112	0.9121	0.9129	0.9138	0.9148	0.9157	0.9167	0.9177	0.9187
89	0.9101	0.9109	0.9118	0.9127	0.9136	0.9145	0.9155	0.9164	0.9175	0.9185

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
75	0.9185	0.9193	0.9202	0.9211	0.9220	0.9229	0.9238	0.9247	0.9256	0.9266
76	0.9188	0.9197	0.9206	0.9215	0.9224	0.9234	0.9243	0.9252	0.9262	0.9272
77	0.9192	0.9201	0.9210	0.9219	0.9228	0.9238	0.9248	0.9257	0.9267	0.9277
78	0.9194	0.9203	0.9213	0.9222	0.9232	0.9242	0.9252	0.9262	0.9272	0.9282
79	0.9197	0.9206	0.9215	0.9225	0.9235	0.9245	0.9255	0.9266	0.9276	0.9287
80	0.9198	0.9208	0.9218	0.9228	0.9238	0.9248	0.9259	0.9269	0.9280	0.9291
81	0.9200	0.9209	0.9219	0.9230	0.9240	0.9251	0.9261	0.9272	0.9283	0.9294
82	0.9201	0.9211	0.9221	0.9231	0.9242	0.9252	0.9263	0.9275	0.9286	0.9297
83	0.9201	0.9211	0.9222	0.9232	0.9243	0.9254	0.9265	0.9277	0.9288	0.9300
84	0.9201	0.9212	0.9222	0.9233	0.9244	0.9255	0.9266	0.9278	0.9290	0.9302
85	0.9201	0.9212	0.9222	0.9233	0.9244	0.9256	0.9267	0.9279	0.9291	0.9303
86	0.9200	0.9211	0.9222	0.9233	0.9244	0.9256	0.9268	0.9280	0.9292	0.9304
87	0.9199	0.9210	0.9221	0.9232	0.9244	0.9256	0.9268	0.9280	0.9292	0.9305
88	0.9198	0.9209	0.9220	0.9231	0.9243	0.9255	0.9267	0.9280	0.9292	0.9305
89	0.9196	0.9207	0.9218	0.9230	0.9242	0.9254	0.9266	0.9279	0.9292	0.9305

Age	60	61	62	63	64	65	66	67	68	69
75	0.9275	0.9284	0.9293	0.9302	0.9311	0.9320	0.9329	0.9337	0.9345	0.9353
76	0.9281	0.9291	0.9300	0.9310	0.9319	0.9328	0.9337	0.9346	0.9355	0.9363
77	0.9287	0.9297	0.9307	0.9317	0.9327	0.9336	0.9346	0.9355	0.9364	0.9373
78	0.9293	0.9303	0.9313	0.9323	0.9333	0.9344	0.9353	0.9363	0.9373	0.9382
79	0.9297	0.9308	0.9319	0.9329	0.9340	0.9350	0.9360	0.9371	0.9380	0.9390
80	0.9302	0.9313	0.9324	0.9335	0.9346	0.9356	0.9367	0.9378	0.9388	0.9398
81	0.9305	0.9317	0.9328	0.9339	0.9351	0.9362	0.9373	0.9384	0.9395	0.9405
82	0.9309	0.9320	0.9332	0.9344	0.9355	0.9367	0.9378	0.9390	0.9401	0.9412
83	0.9312	0.9324	0.9335	0.9348	0.9360	0.9371	0.9383	0.9395	0.9407	0.9418
84	0.9314	0.9326	0.9338	0.9351	0.9363	0.9375	0.9388	0.9400	0.9412	0.9424
85	0.9316	0.9328	0.9341	0.9354	0.9366	0.9379	0.9392	0.9404	0.9416	0.9429
86	0.9317	0.9330	0.9343	0.9356	0.9369	0.9382	0.9395	0.9408	0.9421	0.9433
87	0.9318	0.9331	0.9344	0.9358	0.9371	0.9384	0.9398	0.9411	0.9424	0.9437
88	0.9318	0.9332	0.9345	0.9359	0.9372	0.9386	0.9400	0.9413	0.9427	0.9440
89	0.9318	0.9332	0.9346	0.9359	0.9373	0.9387	0.9401	0.9415	0.9429	0.9443

Table 2a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.9361	0.9368	0.9375	0.9382	0.9388	0.9394	0.9400	0.9405	0.9410	0.9414
76	0.9371	0.9379	0.9386	0.9394	0.9400	0.9407	0.9413	0.9418	0.9424	0.9428
77	0.9381	0.9389	0.9397	0.9405	0.9412	0.9419	0.9425	0.9431	0.9437	0.9442
78	0.9391	0.9399	0.9408	0.9416	0.9423	0.9430	0.9437	0.9444	0.9450	0.9455
79	0.9400	0.9409	0.9417	0.9426	0.9434	0.9442	0.9449	0.9456	0.9462	0.9468
80	0.9408	0.9417	0.9427	0.9435	0.9444	0.9452	0.9460	0.9467	0.9474	0.9481
81	0.9415	0.9425	0.9435	0.9444	0.9453	0.9462	0.9470	0.9478	0.9485	0.9492
82	0.9423	0.9433	0.9443	0.9453	0.9462	0.9471	0.9480	0.9488	0.9496	0.9503
83	0.9429	0.9440	0.9451	0.9461	0.9471	0.9480	0.9489	0.9498	0.9506	0.9514
84	0.9435	0.9447	0.9458	0.9468	0.9479	0.9489	0.9498	0.9507	0.9516	0.9524
85	0.9441	0.9452	0.9464	0.9475	0.9486	0.9496	0.9506	0.9516	0.9525	0.9534
86	0.9446	0.9458	0.9470	0.9481	0.9492	0.9503	0.9514	0.9524	0.9534	0.9543
87	0.9450	0.9462	0.9475	0.9487	0.9499	0.9510	0.9521	0.9531	0.9541	0.9551
88	0.9454	0.9467	0.9479	0.9492	0.9504	0.9516	0.9527	0.9538	0.9549	0.9559
89	0.9457	0.9470	0.9483	0.9496	0.9509	0.9521	0.9533	0.9544	0.9555	0.9566

Age	80	81	82	83	84	85	86	87	88	89
75	0.9418	0.9422	0.9426	0.9429	0.9432	0.9434	0.9436	0.9438	0.9440	0.9442
76	0.9433	0.9437	0.9441	0.9444	0.9447	0.9450	0.9453	0.9455	0.9457	0.9459
77	0.9447	0.9452	0.9456	0.9459	0.9463	0.9466	0.9469	0.9471	0.9473	0.9475
78	0.9461	0.9466	0.9470	0.9474	0.9478	0.9481	0.9484	0.9487	0.9489	0.9492
79	0.9474	0.9479	0.9484	0.9488	0.9492	0.9496	0.9499	0.9502	0.9505	0.9508
80	0.9487	0.9492	0.9497	0.9502	0.9506	0.9510	0.9514	0.9517	0.9520	0.9523
81	0.9499	0.9505	0.9510	0.9515	0.9520	0.9524	0.9528	0.9532	0.9535	0.9538
82	0.9510	0.9517	0.9523	0.9528	0.9533	0.9538	0.9542	0.9546	0.9550	0.9553
83	0.9521	0.9528	0.9535	0.9540	0.9546	0.9551	0.9556	0.9560	0.9564	0.9567
84	0.9532	0.9539	0.9546	0.9552	0.9558	0.9564	0.9569	0.9573	0.9578	0.9581
85	0.9542	0.9550	0.9557	0.9564	0.9570	0.9576	0.9581	0.9586	0.9591	0.9595
86	0.9551	0.9559	0.9567	0.9574	0.9581	0.9587	0.9593	0.9598	0.9603	0.9608
87	0.9560	0.9569	0.9577	0.9584	0.9592	0.9598	0.9604	0.9610	0.9616	0.9620
88	0.9568	0.9577	0.9586	0.9594	0.9602	0.9609	0.9615	0.9622	0.9627	0.9633
89	0.9576	0.9585	0.9594	0.9603	0.9611	0.9619	0.9626	0.9632	0.9638	0.9644

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	50% Joint and Survivor Annuity with Pop-Up

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.7690	0.7693	0.7695	0.7697	0.7700	0.7702	0.7704	0.7706	0.7708	0.7710
31	0.7699	0.7702	0.7704	0.7707	0.7709	0.7712	0.7714	0.7717	0.7719	0.7721
32	0.7708	0.7711	0.7714	0.7717	0.7719	0.7722	0.7725	0.7727	0.7729	0.7732
33	0.7718	0.7721	0.7724	0.7727	0.7729	0.7732	0.7735	0.7738	0.7740	0.7743
34	0.7727	0.7730	0.7733	0.7737	0.7740	0.7743	0.7746	0.7748	0.7751	0.7754
35	0.7737	0.7740	0.7743	0.7747	0.7750	0.7753	0.7756	0.7760	0.7763	0.7765
36	0.7747	0.7750	0.7754	0.7757	0.7761	0.7764	0.7767	0.7771	0.7774	0.7777
37	0.7757	0.7760	0.7764	0.7768	0.7771	0.7775	0.7779	0.7782	0.7786	0.7789
38	0.7767	0.7771	0.7775	0.7778	0.7782	0.7786	0.7790	0.7794	0.7797	0.7801
39	0.7777	0.7781	0.7785	0.7789	0.7793	0.7798	0.7802	0.7806	0.7809	0.7813
40	0.7787	0.7792	0.7796	0.7800	0.7805	0.7809	0.7813	0.7817	0.7822	0.7826
41	0.7798	0.7802	0.7807	0.7812	0.7816	0.7821	0.7825	0.7830	0.7834	0.7838
42	0.7809	0.7813	0.7818	0.7823	0.7828	0.7832	0.7837	0.7842	0.7846	0.7851
43	0.7819	0.7824	0.7829	0.7834	0.7839	0.7844	0.7849	0.7854	0.7859	0.7864
44	0.7830	0.7835	0.7841	0.7846	0.7851	0.7856	0.7861	0.7867	0.7872	0.7877

Age	40	41	42	43	44	45	46	47	48	49
30	0.7712	0.7714	0.7716	0.7717	0.7719	0.7721	0.7722	0.7723	0.7724	0.7726
31	0.7723	0.7725	0.7727	0.7729	0.7730	0.7732	0.7733	0.7735	0.7736	0.7738
32	0.7734	0.7736	0.7738	0.7740	0.7742	0.7744	0.7745	0.7747	0.7748	0.7750
33	0.7745	0.7747	0.7750	0.7752	0.7754	0.7756	0.7758	0.7759	0.7761	0.7762
34	0.7757	0.7759	0.7761	0.7764	0.7766	0.7768	0.7770	0.7772	0.7774	0.7775
35	0.7768	0.7771	0.7774	0.7776	0.7778	0.7781	0.7783	0.7785	0.7787	0.7789
36	0.7780	0.7783	0.7786	0.7789	0.7791	0.7794	0.7796	0.7798	0.7800	0.7803
37	0.7792	0.7795	0.7798	0.7801	0.7804	0.7807	0.7810	0.7812	0.7814	0.7817
38	0.7805	0.7808	0.7811	0.7814	0.7817	0.7820	0.7823	0.7826	0.7828	0.7831
39	0.7817	0.7821	0.7824	0.7828	0.7831	0.7834	0.7837	0.7840	0.7843	0.7846
40	0.7830	0.7834	0.7837	0.7841	0.7845	0.7848	0.7851	0.7855	0.7858	0.7860
41	0.7843	0.7847	0.7851	0.7855	0.7859	0.7862	0.7866	0.7869	0.7872	0.7876
42	0.7856	0.7860	0.7864	0.7869	0.7873	0.7877	0.7880	0.7884	0.7888	0.7891
43	0.7869	0.7873	0.7878	0.7882	0.7887	0.7891	0.7895	0.7899	0.7903	0.7907
44	0.7882	0.7887	0.7892	0.7897	0.7901	0.7906	0.7910	0.7915	0.7919	0.7923

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.7727	0.7728	0.7729	0.7730	0.7730	0.7731	0.7732	0.7733	0.7733	0.7734
31	0.7739	0.7740	0.7741	0.7742	0.7743	0.7744	0.7744	0.7745	0.7746	0.7746
32	0.7751	0.7752	0.7754	0.7755	0.7756	0.7757	0.7757	0.7758	0.7759	0.7760
33	0.7764	0.7765	0.7767	0.7768	0.7769	0.7770	0.7771	0.7772	0.7773	0.7773
34	0.7777	0.7779	0.7780	0.7781	0.7783	0.7784	0.7785	0.7786	0.7787	0.7787
35	0.7791	0.7792	0.7794	0.7795	0.7797	0.7798	0.7799	0.7800	0.7801	0.7802
36	0.7804	0.7806	0.7808	0.7810	0.7811	0.7812	0.7814	0.7815	0.7816	0.7817
37	0.7819	0.7821	0.7822	0.7824	0.7826	0.7827	0.7829	0.7830	0.7831	0.7833
38	0.7833	0.7835	0.7837	0.7839	0.7841	0.7843	0.7844	0.7846	0.7847	0.7848
39	0.7848	0.7850	0.7853	0.7855	0.7857	0.7859	0.7860	0.7862	0.7863	0.7865
40	0.7863	0.7866	0.7868	0.7871	0.7873	0.7875	0.7877	0.7878	0.7880	0.7882
41	0.7879	0.7881	0.7884	0.7887	0.7889	0.7891	0.7893	0.7895	0.7897	0.7899
42	0.7894	0.7897	0.7900	0.7903	0.7906	0.7908	0.7911	0.7913	0.7915	0.7917
43	0.7910	0.7914	0.7917	0.7920	0.7923	0.7926	0.7928	0.7930	0.7933	0.7935
44	0.7927	0.7930	0.7934	0.7937	0.7940	0.7943	0.7946	0.7949	0.7951	0.7953

Age	60	61	62	63	64	65	66	67	68	69
30	0.7734	0.7735	0.7735	0.7736	0.7736	0.7736	0.7737	0.7737	0.7737	0.7737
31	0.7747	0.7748	0.7748	0.7749	0.7749	0.7749	0.7750	0.7750	0.7750	0.7751
32	0.7760	0.7761	0.7762	0.7762	0.7762	0.7763	0.7763	0.7764	0.7764	0.7764
33	0.7774	0.7775	0.7775	0.7776	0.7776	0.7777	0.7777	0.7778	0.7778	0.7778
34	0.7788	0.7789	0.7790	0.7790	0.7791	0.7791	0.7792	0.7792	0.7793	0.7793
35	0.7803	0.7804	0.7804	0.7805	0.7806	0.7806	0.7807	0.7807	0.7808	0.7808
36	0.7818	0.7819	0.7820	0.7821	0.7821	0.7822	0.7822	0.7823	0.7823	0.7824
37	0.7834	0.7835	0.7835	0.7836	0.7837	0.7838	0.7838	0.7839	0.7840	0.7840
38	0.7850	0.7851	0.7852	0.7853	0.7854	0.7854	0.7855	0.7856	0.7856	0.7857
39	0.7866	0.7867	0.7868	0.7870	0.7870	0.7871	0.7872	0.7873	0.7873	0.7874
40	0.7883	0.7884	0.7886	0.7887	0.7888	0.7889	0.7890	0.7890	0.7891	0.7892
41	0.7901	0.7902	0.7903	0.7905	0.7906	0.7907	0.7908	0.7909	0.7909	0.7910
42	0.7918	0.7920	0.7922	0.7923	0.7924	0.7925	0.7926	0.7927	0.7928	0.7929
43	0.7937	0.7939	0.7940	0.7942	0.7943	0.7944	0.7946	0.7947	0.7948	0.7949
44	0.7955	0.7957	0.7959	0.7961	0.7963	0.7964	0.7965	0.7966	0.7968	0.7969

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.7738	0.7738	0.7738	0.7738	0.7738	0.7738	0.7738	0.7739	0.7739	0.7739
31	0.7751	0.7751	0.7751	0.7751	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7764	0.7765	0.7765	0.7765	0.7765	0.7765	0.7766	0.7766	0.7766	0.7766
33	0.7779	0.7779	0.7779	0.7779	0.7779	0.7780	0.7780	0.7780	0.7780	0.7780
34	0.7793	0.7794	0.7794	0.7794	0.7794	0.7794	0.7795	0.7795	0.7795	0.7795
35	0.7809	0.7809	0.7809	0.7809	0.7809	0.7810	0.7810	0.7810	0.7810	0.7810
36	0.7824	0.7825	0.7825	0.7825	0.7825	0.7826	0.7826	0.7826	0.7826	0.7826
37	0.7840	0.7841	0.7841	0.7841	0.7842	0.7842	0.7842	0.7842	0.7842	0.7843
38	0.7857	0.7858	0.7858	0.7858	0.7859	0.7859	0.7859	0.7859	0.7859	0.7860
39	0.7875	0.7875	0.7875	0.7876	0.7876	0.7876	0.7877	0.7877	0.7877	0.7877
40	0.7892	0.7893	0.7893	0.7894	0.7894	0.7894	0.7895	0.7895	0.7895	0.7895
41	0.7911	0.7911	0.7912	0.7912	0.7913	0.7913	0.7913	0.7914	0.7914	0.7914
42	0.7930	0.7930	0.7931	0.7931	0.7932	0.7932	0.7933	0.7933	0.7933	0.7933
43	0.7949	0.7950	0.7951	0.7951	0.7952	0.7952	0.7953	0.7953	0.7953	0.7953
44	0.7969	0.7970	0.7971	0.7972	0.7972	0.7973	0.7973	0.7973	0.7974	0.7974

Age	80	81	82	83	84	85	86	87	88	89
30	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780
34	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795
35	0.7810	0.7810	0.7810	0.7810	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811
36	0.7826	0.7826	0.7826	0.7826	0.7826	0.7826	0.7827	0.7827	0.7827	0.7827
37	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843
38	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860
39	0.7877	0.7877	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878
40	0.7895	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896
41	0.7914	0.7914	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915
42	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934
43	0.7954	0.7954	0.7954	0.7954	0.7954	0.7954	0.7954	0.7954	0.7954	0.7954
44	0.7974	0.7974	0.7975	0.7975	0.7975	0.7975	0.7975	0.7975	0.7975	0.7975

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.7841	0.7847	0.7852	0.7857	0.7863	0.7868	0.7874	0.7879	0.7885	0.7890
46	0.7853	0.7858	0.7864	0.7869	0.7875	0.7880	0.7886	0.7892	0.7897	0.7903
47	0.7864	0.7869	0.7875	0.7881	0.7887	0.7893	0.7899	0.7905	0.7910	0.7916
48	0.7875	0.7881	0.7887	0.7893	0.7899	0.7905	0.7911	0.7917	0.7924	0.7930
49	0.7887	0.7893	0.7899	0.7905	0.7911	0.7917	0.7924	0.7930	0.7937	0.7943
50	0.7898	0.7904	0.7910	0.7917	0.7923	0.7930	0.7936	0.7943	0.7950	0.7957
51	0.7910	0.7916	0.7922	0.7929	0.7936	0.7942	0.7949	0.7956	0.7963	0.7970
52	0.7921	0.7928	0.7934	0.7941	0.7948	0.7955	0.7962	0.7969	0.7976	0.7984
53	0.7933	0.7939	0.7946	0.7953	0.7960	0.7967	0.7975	0.7982	0.7990	0.7997
54	0.7944	0.7951	0.7958	0.7965	0.7972	0.7980	0.7987	0.7995	0.8003	0.8011
55	0.7956	0.7963	0.7970	0.7977	0.7985	0.7992	0.8000	0.8008	0.8016	0.8024
56	0.7967	0.7975	0.7982	0.7989	0.7997	0.8005	0.8013	0.8021	0.8029	0.8037
57	0.7979	0.7986	0.7994	0.8001	0.8009	0.8017	0.8025	0.8034	0.8042	0.8051
58	0.7990	0.7998	0.8005	0.8013	0.8021	0.8029	0.8038	0.8046	0.8055	0.8064
59	0.8001	0.8009	0.8017	0.8025	0.8033	0.8041	0.8050	0.8059	0.8068	0.8077

Age	40	41	42	43	44	45	46	47	48	49
45	0.7895	0.7901	0.7906	0.7911	0.7916	0.7921	0.7926	0.7930	0.7935	0.7939
46	0.7909	0.7914	0.7920	0.7925	0.7931	0.7936	0.7941	0.7946	0.7951	0.7955
47	0.7922	0.7928	0.7934	0.7940	0.7945	0.7951	0.7956	0.7962	0.7967	0.7972
48	0.7936	0.7942	0.7948	0.7954	0.7960	0.7966	0.7972	0.7978	0.7983	0.7988
49	0.7950	0.7956	0.7963	0.7969	0.7975	0.7982	0.7988	0.7994	0.8000	0.8005
50	0.7963	0.7970	0.7977	0.7984	0.7990	0.7997	0.8003	0.8010	0.8016	0.8022
51	0.7977	0.7984	0.7991	0.7998	0.8005	0.8012	0.8019	0.8026	0.8033	0.8039
52	0.7991	0.7998	0.8006	0.8013	0.8021	0.8028	0.8035	0.8042	0.8049	0.8056
53	0.8005	0.8013	0.8020	0.8028	0.8036	0.8043	0.8051	0.8058	0.8066	0.8073
54	0.8019	0.8027	0.8035	0.8043	0.8051	0.8059	0.8067	0.8075	0.8083	0.8090
55	0.8032	0.8041	0.8049	0.8057	0.8066	0.8074	0.8083	0.8091	0.8099	0.8107
56	0.8046	0.8055	0.8063	0.8072	0.8081	0.8090	0.8098	0.8107	0.8116	0.8124
57	0.8060	0.8068	0.8077	0.8086	0.8096	0.8105	0.8114	0.8123	0.8132	0.8141
58	0.8073	0.8082	0.8091	0.8101	0.8110	0.8120	0.8129	0.8139	0.8148	0.8158
59	0.8086	0.8096	0.8105	0.8115	0.8125	0.8135	0.8145	0.8155	0.8164	0.8174

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.7943	0.7947	0.7951	0.7954	0.7958	0.7961	0.7964	0.7967	0.7970	0.7972
46	0.7960	0.7964	0.7968	0.7972	0.7976	0.7979	0.7983	0.7986	0.7989	0.7992
47	0.7977	0.7981	0.7986	0.7990	0.7994	0.7998	0.8001	0.8005	0.8008	0.8011
48	0.7994	0.7999	0.8003	0.8008	0.8012	0.8017	0.8020	0.8024	0.8028	0.8031
49	0.8011	0.8016	0.8021	0.8026	0.8031	0.8036	0.8040	0.8044	0.8048	0.8051
50	0.8028	0.8034	0.8039	0.8045	0.8050	0.8055	0.8059	0.8064	0.8068	0.8072
51	0.8045	0.8052	0.8057	0.8063	0.8069	0.8074	0.8079	0.8084	0.8089	0.8093
52	0.8063	0.8069	0.8076	0.8082	0.8088	0.8094	0.8099	0.8104	0.8109	0.8114
53	0.8080	0.8087	0.8094	0.8101	0.8107	0.8113	0.8119	0.8125	0.8130	0.8135
54	0.8098	0.8105	0.8112	0.8119	0.8126	0.8133	0.8139	0.8145	0.8151	0.8157
55	0.8115	0.8123	0.8131	0.8138	0.8146	0.8153	0.8160	0.8166	0.8173	0.8179
56	0.8133	0.8141	0.8149	0.8157	0.8165	0.8173	0.8180	0.8187	0.8194	0.8200
57	0.8150	0.8159	0.8167	0.8176	0.8184	0.8192	0.8200	0.8208	0.8215	0.8222
58	0.8167	0.8176	0.8186	0.8195	0.8203	0.8212	0.8220	0.8228	0.8236	0.8244
59	0.8184	0.8194	0.8204	0.8213	0.8222	0.8231	0.8240	0.8249	0.8257	0.8266

Age	60	61	62	63	64	65	66	67	68	69
45	0.7975	0.7977	0.7979	0.7981	0.7982	0.7984	0.7985	0.7987	0.7988	0.7989
46	0.7994	0.7997	0.7999	0.8001	0.8003	0.8005	0.8006	0.8008	0.8009	0.8010
47	0.8014	0.8017	0.8019	0.8021	0.8024	0.8026	0.8027	0.8029	0.8030	0.8032
48	0.8034	0.8037	0.8040	0.8042	0.8045	0.8047	0.8049	0.8051	0.8052	0.8054
49	0.8055	0.8058	0.8061	0.8064	0.8067	0.8069	0.8071	0.8073	0.8075	0.8077
50	0.8076	0.8079	0.8083	0.8086	0.8089	0.8091	0.8094	0.8096	0.8098	0.8100
51	0.8097	0.8101	0.8105	0.8108	0.8111	0.8114	0.8117	0.8119	0.8121	0.8123
52	0.8119	0.8123	0.8127	0.8131	0.8134	0.8137	0.8140	0.8143	0.8145	0.8148
53	0.8140	0.8145	0.8149	0.8153	0.8157	0.8161	0.8164	0.8167	0.8170	0.8172
54	0.8162	0.8167	0.8172	0.8176	0.8181	0.8185	0.8188	0.8192	0.8195	0.8197
55	0.8184	0.8190	0.8195	0.8200	0.8204	0.8209	0.8213	0.8216	0.8220	0.8223
56	0.8207	0.8212	0.8218	0.8223	0.8228	0.8233	0.8238	0.8242	0.8245	0.8249
57	0.8229	0.8235	0.8241	0.8247	0.8253	0.8258	0.8263	0.8267	0.8271	0.8275
58	0.8251	0.8258	0.8265	0.8271	0.8277	0.8283	0.8288	0.8293	0.8297	0.8301
59	0.8273	0.8281	0.8288	0.8295	0.8301	0.8307	0.8313	0.8318	0.8323	0.8328

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.7990	0.7991	0.7992	0.7992	0.7993	0.7994	0.7994	0.7994	0.7995	0.7995
46	0.8011	0.8012	0.8013	0.8014	0.8015	0.8015	0.8016	0.8016	0.8017	0.8017
47	0.8033	0.8034	0.8035	0.8036	0.8037	0.8037	0.8038	0.8039	0.8039	0.8039
48	0.8055	0.8057	0.8058	0.8059	0.8059	0.8060	0.8061	0.8061	0.8062	0.8062
49	0.8078	0.8079	0.8081	0.8082	0.8083	0.8084	0.8084	0.8085	0.8086	0.8086
50	0.8101	0.8103	0.8104	0.8106	0.8107	0.8108	0.8108	0.8109	0.8110	0.8110
51	0.8125	0.8127	0.8129	0.8130	0.8131	0.8132	0.8133	0.8134	0.8135	0.8135
52	0.8150	0.8152	0.8153	0.8155	0.8156	0.8157	0.8158	0.8159	0.8160	0.8161
53	0.8175	0.8177	0.8179	0.8180	0.8182	0.8183	0.8184	0.8185	0.8186	0.8187
54	0.8200	0.8202	0.8204	0.8206	0.8208	0.8209	0.8211	0.8212	0.8213	0.8214
55	0.8226	0.8228	0.8231	0.8233	0.8235	0.8236	0.8238	0.8239	0.8240	0.8241
56	0.8252	0.8255	0.8257	0.8260	0.8262	0.8264	0.8265	0.8267	0.8268	0.8269
57	0.8278	0.8282	0.8284	0.8287	0.8289	0.8292	0.8293	0.8295	0.8296	0.8298
58	0.8305	0.8309	0.8312	0.8315	0.8317	0.8320	0.8322	0.8324	0.8325	0.8327
59	0.8332	0.8336	0.8340	0.8343	0.8346	0.8349	0.8351	0.8353	0.8355	0.8356

Age	80	81	82	83	84	85	86	87	88	89
45	0.7995	0.7996	0.7996	0.7996	0.7996	0.7996	0.7996	0.7996	0.7996	0.7996
46	0.8017	0.8017	0.8018	0.8018	0.8018	0.8018	0.8018	0.8018	0.8018	0.8018
47	0.8040	0.8040	0.8040	0.8040	0.8041	0.8041	0.8041	0.8041	0.8041	0.8041
48	0.8063	0.8063	0.8063	0.8064	0.8064	0.8064	0.8064	0.8064	0.8064	0.8064
49	0.8086	0.8087	0.8087	0.8087	0.8088	0.8088	0.8088	0.8088	0.8088	0.8088
50	0.8111	0.8111	0.8112	0.8112	0.8112	0.8112	0.8112	0.8112	0.8113	0.8113
51	0.8136	0.8136	0.8137	0.8137	0.8137	0.8137	0.8138	0.8138	0.8138	0.8138
52	0.8161	0.8162	0.8162	0.8163	0.8163	0.8163	0.8163	0.8164	0.8164	0.8164
53	0.8188	0.8188	0.8189	0.8189	0.8189	0.8190	0.8190	0.8190	0.8190	0.8190
54	0.8215	0.8215	0.8216	0.8216	0.8217	0.8217	0.8217	0.8217	0.8218	0.8218
55	0.8242	0.8243	0.8243	0.8244	0.8244	0.8245	0.8245	0.8245	0.8245	0.8246
56	0.8270	0.8271	0.8272	0.8272	0.8273	0.8273	0.8274	0.8274	0.8274	0.8274
57	0.8299	0.8300	0.8301	0.8301	0.8302	0.8302	0.8303	0.8303	0.8303	0.8303
58	0.8328	0.8329	0.8330	0.8331	0.8332	0.8332	0.8333	0.8333	0.8333	0.8333
59	0.8358	0.8359	0.8360	0.8361	0.8362	0.8362	0.8363	0.8363	0.8364	0.8364

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.8012	0.8020	0.8028	0.8036	0.8044	0.8053	0.8062	0.8071	0.8080	0.8090
61	0.8023	0.8031	0.8039	0.8047	0.8056	0.8065	0.8074	0.8083	0.8092	0.8102
62	0.8033	0.8041	0.8049	0.8058	0.8067	0.8076	0.8085	0.8094	0.8104	0.8114
63	0.8043	0.8051	0.8060	0.8068	0.8077	0.8087	0.8096	0.8106	0.8116	0.8126
64	0.8053	0.8061	0.8070	0.8079	0.8088	0.8097	0.8107	0.8117	0.8127	0.8137
65	0.8062	0.8070	0.8079	0.8088	0.8097	0.8107	0.8117	0.8127	0.8137	0.8148
66	0.8071	0.8079	0.8088	0.8097	0.8107	0.8117	0.8127	0.8137	0.8148	0.8159
67	0.8079	0.8088	0.8097	0.8106	0.8116	0.8126	0.8136	0.8146	0.8157	0.8168
68	0.8086	0.8095	0.8104	0.8114	0.8124	0.8134	0.8144	0.8155	0.8166	0.8178
69	0.8093	0.8102	0.8112	0.8121	0.8131	0.8142	0.8152	0.8163	0.8175	0.8186
70	0.8100	0.8109	0.8118	0.8128	0.8138	0.8149	0.8160	0.8171	0.8182	0.8194
71	0.8105	0.8114	0.8124	0.8134	0.8144	0.8155	0.8166	0.8178	0.8189	0.8202
72	0.8110	0.8119	0.8129	0.8139	0.8150	0.8161	0.8172	0.8184	0.8196	0.8208
73	0.8114	0.8123	0.8133	0.8144	0.8155	0.8166	0.8177	0.8189	0.8201	0.8214
74	0.8117	0.8127	0.8137	0.8147	0.8158	0.8170	0.8181	0.8193	0.8206	0.8218

Age	40	41	42	43	44	45	46	47	48	49
60	0.8099	0.8109	0.8119	0.8129	0.8139	0.8149	0.8160	0.8170	0.8180	0.8191
61	0.8112	0.8122	0.8132	0.8143	0.8153	0.8164	0.8174	0.8185	0.8196	0.8207
62	0.8124	0.8135	0.8145	0.8156	0.8167	0.8178	0.8189	0.8200	0.8211	0.8222
63	0.8136	0.8147	0.8158	0.8169	0.8180	0.8191	0.8203	0.8214	0.8226	0.8238
64	0.8148	0.8159	0.8170	0.8181	0.8193	0.8205	0.8216	0.8228	0.8240	0.8252
65	0.8159	0.8170	0.8182	0.8193	0.8205	0.8217	0.8229	0.8242	0.8254	0.8267
66	0.8170	0.8181	0.8193	0.8205	0.8217	0.8229	0.8242	0.8255	0.8268	0.8281
67	0.8180	0.8192	0.8204	0.8216	0.8228	0.8241	0.8254	0.8267	0.8280	0.8294
68	0.8189	0.8201	0.8214	0.8226	0.8239	0.8252	0.8265	0.8279	0.8293	0.8307
69	0.8198	0.8211	0.8223	0.8236	0.8249	0.8263	0.8276	0.8290	0.8304	0.8319
70	0.8206	0.8219	0.8232	0.8245	0.8259	0.8272	0.8286	0.8301	0.8315	0.8330
71	0.8214	0.8227	0.8240	0.8253	0.8267	0.8281	0.8296	0.8310	0.8325	0.8340
72	0.8221	0.8234	0.8247	0.8261	0.8275	0.8289	0.8304	0.8319	0.8334	0.8350
73	0.8227	0.8240	0.8254	0.8268	0.8282	0.8297	0.8312	0.8327	0.8343	0.8359
74	0.8232	0.8245	0.8259	0.8274	0.8288	0.8303	0.8319	0.8334	0.8350	0.8367

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.8201	0.8211	0.8221	0.8231	0.8241	0.8251	0.8260	0.8269	0.8278	0.8287
61	0.8217	0.8228	0.8239	0.8249	0.8260	0.8270	0.8280	0.8290	0.8299	0.8308
62	0.8234	0.8245	0.8256	0.8267	0.8278	0.8289	0.8299	0.8310	0.8320	0.8330
63	0.8249	0.8261	0.8273	0.8284	0.8296	0.8307	0.8318	0.8329	0.8340	0.8350
64	0.8265	0.8277	0.8289	0.8301	0.8313	0.8325	0.8337	0.8348	0.8360	0.8371
65	0.8279	0.8292	0.8305	0.8317	0.8330	0.8342	0.8355	0.8367	0.8379	0.8391
66	0.8294	0.8307	0.8320	0.8333	0.8346	0.8359	0.8372	0.8385	0.8398	0.8410
67	0.8307	0.8321	0.8335	0.8348	0.8362	0.8376	0.8389	0.8403	0.8416	0.8429
68	0.8321	0.8335	0.8349	0.8363	0.8377	0.8392	0.8406	0.8420	0.8434	0.8448
69	0.8333	0.8348	0.8362	0.8377	0.8392	0.8407	0.8421	0.8436	0.8451	0.8465
70	0.8345	0.8360	0.8375	0.8390	0.8406	0.8421	0.8436	0.8452	0.8467	0.8482
71	0.8356	0.8371	0.8387	0.8403	0.8418	0.8434	0.8450	0.8466	0.8482	0.8498
72	0.8366	0.8382	0.8398	0.8414	0.8431	0.8447	0.8464	0.8480	0.8497	0.8513
73	0.8375	0.8391	0.8408	0.8425	0.8442	0.8459	0.8476	0.8493	0.8511	0.8528
74	0.8383	0.8400	0.8417	0.8435	0.8452	0.8470	0.8488	0.8505	0.8523	0.8541

Age	60	61	62	63	64	65	66	67	68	69
60	0.8295	0.8304	0.8311	0.8319	0.8326	0.8332	0.8339	0.8344	0.8350	0.8355
61	0.8317	0.8326	0.8334	0.8342	0.8350	0.8357	0.8364	0.8370	0.8376	0.8382
62	0.8339	0.8348	0.8357	0.8366	0.8374	0.8382	0.8389	0.8396	0.8403	0.8409
63	0.8361	0.8371	0.8380	0.8389	0.8398	0.8407	0.8415	0.8422	0.8429	0.8436
64	0.8382	0.8392	0.8403	0.8412	0.8422	0.8431	0.8440	0.8448	0.8455	0.8463
65	0.8402	0.8414	0.8425	0.8435	0.8445	0.8455	0.8464	0.8473	0.8481	0.8489
66	0.8423	0.8434	0.8446	0.8457	0.8468	0.8479	0.8489	0.8498	0.8507	0.8516
67	0.8442	0.8455	0.8467	0.8479	0.8491	0.8502	0.8512	0.8523	0.8532	0.8541
68	0.8461	0.8474	0.8487	0.8500	0.8512	0.8524	0.8536	0.8547	0.8557	0.8567
69	0.8479	0.8494	0.8507	0.8521	0.8534	0.8546	0.8559	0.8570	0.8581	0.8592
70	0.8497	0.8512	0.8526	0.8541	0.8554	0.8568	0.8581	0.8593	0.8605	0.8617
71	0.8514	0.8529	0.8545	0.8560	0.8574	0.8588	0.8602	0.8615	0.8628	0.8640
72	0.8530	0.8546	0.8562	0.8578	0.8593	0.8608	0.8623	0.8637	0.8650	0.8663
73	0.8545	0.8562	0.8579	0.8595	0.8611	0.8627	0.8642	0.8657	0.8672	0.8686
74	0.8559	0.8577	0.8594	0.8611	0.8628	0.8645	0.8661	0.8677	0.8692	0.8707

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		70	71	72	73	74	75	76	77	78	79
	60	0.8360	0.8364	0.8368	0.8371	0.8375	0.8378	0.8380	0.8383	0.8385	0.8387
	61	0.8387	0.8392	0.8396	0.8400	0.8404	0.8407	0.8410	0.8413	0.8415	0.8417
	62	0.8414	0.8420	0.8425	0.8429	0.8433	0.8437	0.8440	0.8443	0.8445	0.8448
	63	0.8442	0.8448	0.8453	0.8458	0.8462	0.8466	0.8470	0.8473	0.8476	0.8479
	64	0.8469	0.8476	0.8481	0.8487	0.8492	0.8496	0.8500	0.8504	0.8507	0.8510
	65	0.8497	0.8503	0.8510	0.8516	0.8521	0.8526	0.8531	0.8535	0.8538	0.8542
	66	0.8524	0.8531	0.8538	0.8544	0.8550	0.8556	0.8561	0.8565	0.8569	0.8573
	67	0.8550	0.8558	0.8566	0.8573	0.8579	0.8585	0.8591	0.8596	0.8600	0.8605
	68	0.8576	0.8585	0.8593	0.8601	0.8608	0.8615	0.8621	0.8626	0.8631	0.8636
	69	0.8602	0.8612	0.8621	0.8629	0.8637	0.8644	0.8651	0.8657	0.8662	0.8667
	70	0.8627	0.8638	0.8647	0.8656	0.8665	0.8673	0.8680	0.8687	0.8693	0.8698
	71	0.8652	0.8663	0.8673	0.8683	0.8692	0.8701	0.8709	0.8716	0.8723	0.8729
	72	0.8676	0.8688	0.8699	0.8709	0.8719	0.8729	0.8737	0.8745	0.8753	0.8759
	73	0.8699	0.8712	0.8724	0.8735	0.8746	0.8756	0.8765	0.8774	0.8782	0.8789
	74	0.8721	0.8735	0.8747	0.8760	0.8771	0.8782	0.8792	0.8801	0.8810	0.8818

Age		80	81	82	83	84	85	86	87	88	89
	60	0.8388	0.8389	0.8391	0.8392	0.8393	0.8393	0.8394	0.8394	0.8395	0.8395
	61	0.8419	0.8420	0.8422	0.8423	0.8424	0.8425	0.8425	0.8426	0.8426	0.8427
	62	0.8450	0.8452	0.8453	0.8454	0.8456	0.8456	0.8457	0.8458	0.8459	0.8459
	63	0.8481	0.8483	0.8485	0.8486	0.8488	0.8489	0.8490	0.8490	0.8491	0.8492
	64	0.8513	0.8515	0.8517	0.8519	0.8520	0.8521	0.8522	0.8523	0.8524	0.8525
	65	0.8544	0.8547	0.8549	0.8551	0.8553	0.8554	0.8556	0.8557	0.8557	0.8558
	66	0.8576	0.8579	0.8582	0.8584	0.8586	0.8587	0.8589	0.8590	0.8591	0.8592
	67	0.8608	0.8611	0.8614	0.8617	0.8619	0.8621	0.8622	0.8624	0.8625	0.8626
	68	0.8640	0.8644	0.8647	0.8650	0.8652	0.8654	0.8656	0.8658	0.8659	0.8660
	69	0.8672	0.8676	0.8679	0.8682	0.8685	0.8688	0.8690	0.8692	0.8693	0.8694
	70	0.8703	0.8708	0.8712	0.8715	0.8718	0.8721	0.8724	0.8726	0.8727	0.8729
	71	0.8734	0.8739	0.8744	0.8748	0.8751	0.8754	0.8757	0.8760	0.8762	0.8763
	72	0.8765	0.8771	0.8776	0.8780	0.8784	0.8788	0.8791	0.8793	0.8796	0.8798
	73	0.8796	0.8802	0.8807	0.8812	0.8816	0.8820	0.8824	0.8827	0.8829	0.8832
	74	0.8825	0.8832	0.8838	0.8844	0.8848	0.8853	0.8857	0.8860	0.8863	0.8866

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.8119	0.8129	0.8140	0.8150	0.8161	0.8173	0.8185	0.8197	0.8209	0.8222
76	0.8121	0.8131	0.8141	0.8152	0.8163	0.8175	0.8187	0.8199	0.8212	0.8226
77	0.8121	0.8132	0.8142	0.8153	0.8165	0.8176	0.8189	0.8201	0.8214	0.8228
78	0.8121	0.8132	0.8142	0.8154	0.8165	0.8177	0.8189	0.8202	0.8215	0.8229
79	0.8120	0.8131	0.8142	0.8153	0.8165	0.8177	0.8189	0.8202	0.8216	0.8230
80	0.8119	0.8129	0.8140	0.8152	0.8164	0.8176	0.8189	0.8202	0.8216	0.8230
81	0.8116	0.8127	0.8138	0.8150	0.8162	0.8174	0.8187	0.8201	0.8214	0.8229
82	0.8113	0.8124	0.8135	0.8147	0.8159	0.8172	0.8185	0.8199	0.8213	0.8227
83	0.8110	0.8121	0.8132	0.8144	0.8156	0.8169	0.8182	0.8196	0.8210	0.8225
84	0.8105	0.8116	0.8128	0.8140	0.8153	0.8165	0.8179	0.8193	0.8207	0.8222
85	0.8100	0.8112	0.8123	0.8136	0.8148	0.8161	0.8175	0.8189	0.8203	0.8218
86	0.8095	0.8106	0.8118	0.8130	0.8143	0.8156	0.8170	0.8184	0.8199	0.8214
87	0.8089	0.8100	0.8112	0.8125	0.8137	0.8151	0.8165	0.8179	0.8194	0.8209
88	0.8082	0.8093	0.8106	0.8118	0.8131	0.8144	0.8158	0.8173	0.8188	0.8203
89	0.8074	0.8086	0.8098	0.8111	0.8124	0.8138	0.8152	0.8166	0.8181	0.8197

Age	40	41	42	43	44	45	46	47	48	49
75	0.8236	0.8250	0.8264	0.8279	0.8294	0.8309	0.8325	0.8341	0.8357	0.8374
76	0.8239	0.8253	0.8268	0.8283	0.8298	0.8314	0.8330	0.8346	0.8363	0.8380
77	0.8242	0.8256	0.8271	0.8286	0.8301	0.8317	0.8334	0.8350	0.8368	0.8385
78	0.8243	0.8258	0.8273	0.8288	0.8304	0.8320	0.8337	0.8354	0.8372	0.8389
79	0.8244	0.8259	0.8274	0.8290	0.8306	0.8322	0.8339	0.8357	0.8375	0.8393
80	0.8244	0.8259	0.8275	0.8291	0.8307	0.8324	0.8341	0.8359	0.8377	0.8395
81	0.8243	0.8259	0.8274	0.8290	0.8307	0.8324	0.8342	0.8360	0.8378	0.8397
82	0.8242	0.8257	0.8273	0.8290	0.8307	0.8324	0.8342	0.8360	0.8379	0.8398
83	0.8240	0.8256	0.8272	0.8288	0.8305	0.8323	0.8341	0.8360	0.8379	0.8398
84	0.8237	0.8253	0.8269	0.8286	0.8303	0.8321	0.8340	0.8358	0.8378	0.8398
85	0.8234	0.8250	0.8266	0.8283	0.8301	0.8319	0.8337	0.8357	0.8376	0.8396
86	0.8230	0.8246	0.8263	0.8280	0.8298	0.8316	0.8335	0.8354	0.8374	0.8394
87	0.8225	0.8241	0.8258	0.8276	0.8294	0.8312	0.8331	0.8351	0.8371	0.8391
88	0.8219	0.8236	0.8253	0.8271	0.8289	0.8307	0.8327	0.8347	0.8367	0.8388
89	0.8213	0.8230	0.8247	0.8265	0.8283	0.8302	0.8322	0.8342	0.8362	0.8383

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		50	51	52	53	54	55	56	57	58	59
	75	0.8391	0.8408	0.8426	0.8443	0.8461	0.8480	0.8498	0.8516	0.8535	0.8553
	76	0.8397	0.8415	0.8433	0.8451	0.8470	0.8489	0.8507	0.8526	0.8546	0.8565
	77	0.8403	0.8421	0.8439	0.8458	0.8477	0.8496	0.8516	0.8536	0.8555	0.8575
	78	0.8408	0.8426	0.8445	0.8464	0.8484	0.8503	0.8523	0.8544	0.8564	0.8584
	79	0.8411	0.8430	0.8450	0.8469	0.8489	0.8509	0.8530	0.8551	0.8572	0.8593
	80	0.8414	0.8434	0.8453	0.8473	0.8494	0.8514	0.8535	0.8557	0.8578	0.8600
	81	0.8416	0.8436	0.8456	0.8477	0.8497	0.8519	0.8540	0.8562	0.8584	0.8606
	82	0.8418	0.8438	0.8458	0.8479	0.8500	0.8522	0.8544	0.8566	0.8589	0.8611
	83	0.8418	0.8438	0.8459	0.8480	0.8502	0.8524	0.8547	0.8569	0.8592	0.8616
	84	0.8418	0.8438	0.8460	0.8481	0.8503	0.8526	0.8549	0.8572	0.8595	0.8619
	85	0.8417	0.8438	0.8459	0.8481	0.8504	0.8526	0.8550	0.8573	0.8598	0.8622
	86	0.8415	0.8436	0.8458	0.8480	0.8503	0.8526	0.8550	0.8574	0.8599	0.8624
	87	0.8412	0.8434	0.8456	0.8479	0.8502	0.8525	0.8550	0.8574	0.8599	0.8624
	88	0.8409	0.8431	0.8453	0.8476	0.8500	0.8524	0.8548	0.8573	0.8598	0.8624
	89	0.8405	0.8427	0.8450	0.8473	0.8497	0.8521	0.8546	0.8571	0.8597	0.8623

Age		60	61	62	63	64	65	66	67	68	69
	75	0.8572	0.8590	0.8609	0.8627	0.8644	0.8662	0.8679	0.8696	0.8712	0.8727
	76	0.8584	0.8603	0.8622	0.8641	0.8660	0.8678	0.8696	0.8713	0.8730	0.8747
	77	0.8595	0.8615	0.8635	0.8654	0.8674	0.8693	0.8711	0.8730	0.8748	0.8765
	78	0.8605	0.8625	0.8646	0.8666	0.8686	0.8706	0.8726	0.8745	0.8764	0.8782
	79	0.8614	0.8635	0.8656	0.8677	0.8698	0.8719	0.8739	0.8759	0.8779	0.8798
	80	0.8622	0.8644	0.8665	0.8687	0.8709	0.8731	0.8752	0.8773	0.8793	0.8813
	81	0.8629	0.8651	0.8674	0.8696	0.8719	0.8741	0.8763	0.8785	0.8806	0.8827
	82	0.8634	0.8658	0.8681	0.8704	0.8727	0.8750	0.8773	0.8796	0.8818	0.8840
	83	0.8639	0.8663	0.8687	0.8711	0.8735	0.8759	0.8782	0.8806	0.8829	0.8851
	84	0.8643	0.8668	0.8692	0.8717	0.8742	0.8766	0.8790	0.8814	0.8838	0.8862
	85	0.8647	0.8672	0.8697	0.8722	0.8747	0.8772	0.8797	0.8822	0.8847	0.8871
	86	0.8649	0.8674	0.8700	0.8726	0.8752	0.8778	0.8803	0.8829	0.8854	0.8879
	87	0.8650	0.8676	0.8702	0.8729	0.8755	0.8782	0.8808	0.8835	0.8861	0.8887
	88	0.8650	0.8677	0.8704	0.8731	0.8758	0.8785	0.8812	0.8839	0.8866	0.8893
	89	0.8650	0.8677	0.8704	0.8732	0.8759	0.8787	0.8815	0.8843	0.8870	0.8898

Table 2b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
50% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.8742	0.8757	0.8770	0.8783	0.8796	0.8807	0.8818	0.8828	0.8838	0.8847
76	0.8762	0.8778	0.8792	0.8806	0.8819	0.8832	0.8844	0.8855	0.8865	0.8874
77	0.8782	0.8798	0.8813	0.8828	0.8842	0.8855	0.8868	0.8880	0.8891	0.8901
78	0.8800	0.8817	0.8833	0.8849	0.8864	0.8878	0.8891	0.8904	0.8916	0.8927
79	0.8817	0.8835	0.8852	0.8868	0.8884	0.8899	0.8914	0.8927	0.8940	0.8952
80	0.8832	0.8851	0.8870	0.8887	0.8904	0.8920	0.8935	0.8949	0.8963	0.8976
81	0.8847	0.8867	0.8886	0.8904	0.8922	0.8939	0.8955	0.8971	0.8985	0.8998
82	0.8861	0.8881	0.8901	0.8921	0.8939	0.8957	0.8974	0.8990	0.9006	0.9020
83	0.8873	0.8895	0.8916	0.8936	0.8956	0.8974	0.8992	0.9009	0.9026	0.9041
84	0.8885	0.8907	0.8929	0.8950	0.8971	0.8990	0.9009	0.9027	0.9044	0.9060
85	0.8895	0.8918	0.8941	0.8963	0.8984	0.9005	0.9025	0.9044	0.9062	0.9079
86	0.8904	0.8928	0.8952	0.8975	0.8997	0.9019	0.9039	0.9059	0.9078	0.9096
87	0.8912	0.8937	0.8962	0.8985	0.9009	0.9031	0.9053	0.9074	0.9094	0.9113
88	0.8919	0.8945	0.8970	0.8995	0.9019	0.9042	0.9065	0.9087	0.9108	0.9128
89	0.8925	0.8951	0.8978	0.9003	0.9028	0.9053	0.9076	0.9099	0.9121	0.9141

Age	80	81	82	83	84	85	86	87	88	89
75	0.8855	0.8862	0.8868	0.8874	0.8880	0.8885	0.8889	0.8893	0.8896	0.8899
76	0.8883	0.8891	0.8898	0.8905	0.8911	0.8916	0.8921	0.8925	0.8929	0.8932
77	0.8910	0.8919	0.8927	0.8934	0.8941	0.8947	0.8952	0.8957	0.8961	0.8965
78	0.8937	0.8946	0.8955	0.8963	0.8970	0.8977	0.8982	0.8988	0.8992	0.8997
79	0.8963	0.8973	0.8982	0.8991	0.8999	0.9006	0.9012	0.9018	0.9023	0.9028
80	0.8987	0.8998	0.9008	0.9018	0.9026	0.9034	0.9041	0.9047	0.9053	0.9058
81	0.9011	0.9023	0.9034	0.9044	0.9053	0.9061	0.9069	0.9076	0.9082	0.9088
82	0.9034	0.9046	0.9058	0.9069	0.9079	0.9088	0.9096	0.9104	0.9111	0.9117
83	0.9055	0.9069	0.9081	0.9093	0.9103	0.9113	0.9122	0.9131	0.9138	0.9145
84	0.9076	0.9090	0.9103	0.9116	0.9127	0.9138	0.9148	0.9157	0.9165	0.9173
85	0.9095	0.9110	0.9124	0.9138	0.9150	0.9162	0.9172	0.9182	0.9191	0.9199
86	0.9113	0.9129	0.9145	0.9159	0.9172	0.9184	0.9196	0.9206	0.9216	0.9225
87	0.9131	0.9147	0.9163	0.9179	0.9193	0.9206	0.9218	0.9229	0.9240	0.9249
88	0.9146	0.9164	0.9181	0.9197	0.9212	0.9226	0.9239	0.9251	0.9263	0.9273
89	0.9161	0.9180	0.9198	0.9215	0.9231	0.9245	0.9259	0.9272	0.9285	0.9296

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	50% Joint and Survivor Annuity with Pop-Up

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.8801	0.8803	0.8805	0.8808	0.8810	0.8812	0.8814	0.8816	0.8818	0.8820
31	0.8803	0.8806	0.8808	0.8810	0.8813	0.8815	0.8817	0.8819	0.8822	0.8824
32	0.8805	0.8808	0.8811	0.8813	0.8816	0.8818	0.8821	0.8823	0.8825	0.8827
33	0.8808	0.8810	0.8813	0.8816	0.8819	0.8821	0.8824	0.8826	0.8829	0.8831
34	0.8810	0.8813	0.8816	0.8819	0.8821	0.8824	0.8827	0.8830	0.8832	0.8835
35	0.8812	0.8815	0.8818	0.8821	0.8824	0.8827	0.8830	0.8833	0.8836	0.8839
36	0.8814	0.8817	0.8821	0.8824	0.8827	0.8830	0.8833	0.8836	0.8839	0.8842
37	0.8816	0.8820	0.8823	0.8826	0.8830	0.8833	0.8836	0.8840	0.8843	0.8846
38	0.8818	0.8822	0.8825	0.8829	0.8832	0.8836	0.8840	0.8843	0.8846	0.8850
39	0.8820	0.8824	0.8828	0.8831	0.8835	0.8839	0.8842	0.8846	0.8850	0.8853
40	0.8822	0.8826	0.8830	0.8834	0.8838	0.8841	0.8845	0.8849	0.8853	0.8857
41	0.8824	0.8828	0.8832	0.8836	0.8840	0.8844	0.8848	0.8852	0.8856	0.8860
42	0.8825	0.8830	0.8834	0.8838	0.8842	0.8847	0.8851	0.8855	0.8860	0.8864
43	0.8827	0.8831	0.8836	0.8840	0.8845	0.8849	0.8854	0.8858	0.8863	0.8867
44	0.8829	0.8833	0.8838	0.8842	0.8847	0.8852	0.8856	0.8861	0.8866	0.8870

Age	40	41	42	43	44	45	46	47	48	49
30	0.8822	0.8823	0.8825	0.8827	0.8828	0.8830	0.8831	0.8832	0.8834	0.8835
31	0.8826	0.8827	0.8829	0.8831	0.8833	0.8834	0.8836	0.8837	0.8839	0.8840
32	0.8829	0.8832	0.8834	0.8835	0.8837	0.8839	0.8841	0.8842	0.8844	0.8845
33	0.8833	0.8836	0.8838	0.8840	0.8842	0.8844	0.8846	0.8847	0.8849	0.8850
34	0.8837	0.8840	0.8842	0.8844	0.8847	0.8849	0.8851	0.8852	0.8854	0.8856
35	0.8841	0.8844	0.8846	0.8849	0.8851	0.8853	0.8856	0.8858	0.8860	0.8861
36	0.8845	0.8848	0.8851	0.8853	0.8856	0.8858	0.8861	0.8863	0.8865	0.8867
37	0.8849	0.8852	0.8855	0.8858	0.8861	0.8863	0.8866	0.8868	0.8871	0.8873
38	0.8853	0.8856	0.8859	0.8862	0.8865	0.8868	0.8871	0.8874	0.8876	0.8879
39	0.8857	0.8860	0.8864	0.8867	0.8870	0.8873	0.8876	0.8879	0.8882	0.8884
40	0.8861	0.8864	0.8868	0.8871	0.8875	0.8878	0.8881	0.8884	0.8887	0.8890
41	0.8864	0.8868	0.8872	0.8876	0.8879	0.8883	0.8886	0.8890	0.8893	0.8896
42	0.8868	0.8872	0.8876	0.8880	0.8884	0.8888	0.8892	0.8895	0.8899	0.8902
43	0.8872	0.8876	0.8880	0.8884	0.8889	0.8893	0.8897	0.8900	0.8904	0.8908
44	0.8875	0.8880	0.8884	0.8889	0.8893	0.8897	0.8902	0.8906	0.8910	0.8914

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.8836	0.8837	0.8838	0.8839	0.8840	0.8841	0.8841	0.8842	0.8843	0.8843
31	0.8841	0.8842	0.8843	0.8844	0.8845	0.8846	0.8847	0.8848	0.8849	0.8849
32	0.8846	0.8848	0.8849	0.8850	0.8851	0.8852	0.8853	0.8854	0.8855	0.8855
33	0.8852	0.8853	0.8855	0.8856	0.8857	0.8858	0.8859	0.8860	0.8861	0.8862
34	0.8858	0.8859	0.8860	0.8862	0.8863	0.8864	0.8865	0.8866	0.8867	0.8868
35	0.8863	0.8865	0.8866	0.8868	0.8869	0.8871	0.8872	0.8873	0.8874	0.8875
36	0.8869	0.8871	0.8873	0.8874	0.8876	0.8877	0.8878	0.8880	0.8881	0.8882
37	0.8875	0.8877	0.8879	0.8881	0.8882	0.8884	0.8885	0.8887	0.8888	0.8889
38	0.8881	0.8883	0.8885	0.8887	0.8889	0.8891	0.8892	0.8894	0.8895	0.8896
39	0.8887	0.8889	0.8891	0.8894	0.8896	0.8897	0.8899	0.8901	0.8903	0.8904
40	0.8893	0.8895	0.8898	0.8900	0.8902	0.8905	0.8906	0.8908	0.8910	0.8912
41	0.8899	0.8902	0.8904	0.8907	0.8909	0.8912	0.8914	0.8916	0.8918	0.8920
42	0.8905	0.8908	0.8911	0.8914	0.8916	0.8919	0.8921	0.8923	0.8926	0.8927
43	0.8911	0.8914	0.8918	0.8921	0.8924	0.8926	0.8929	0.8931	0.8933	0.8936
44	0.8917	0.8921	0.8924	0.8928	0.8931	0.8934	0.8936	0.8939	0.8942	0.8944

Age	60	61	62	63	64	65	66	67	68	69
30	0.8844	0.8844	0.8845	0.8845	0.8846	0.8846	0.8846	0.8847	0.8847	0.8847
31	0.8850	0.8850	0.8851	0.8851	0.8852	0.8852	0.8853	0.8853	0.8853	0.8854
32	0.8856	0.8857	0.8857	0.8858	0.8858	0.8859	0.8859	0.8860	0.8860	0.8860
33	0.8862	0.8863	0.8864	0.8864	0.8865	0.8866	0.8866	0.8866	0.8867	0.8867
34	0.8869	0.8870	0.8871	0.8871	0.8872	0.8872	0.8873	0.8873	0.8874	0.8874
35	0.8876	0.8877	0.8878	0.8878	0.8879	0.8880	0.8880	0.8881	0.8881	0.8882
36	0.8883	0.8884	0.8885	0.8886	0.8886	0.8887	0.8888	0.8888	0.8889	0.8889
37	0.8890	0.8891	0.8892	0.8893	0.8894	0.8895	0.8895	0.8896	0.8897	0.8897
38	0.8898	0.8899	0.8900	0.8901	0.8902	0.8903	0.8903	0.8904	0.8905	0.8905
39	0.8905	0.8907	0.8908	0.8909	0.8910	0.8911	0.8912	0.8912	0.8913	0.8914
40	0.8913	0.8915	0.8916	0.8917	0.8918	0.8919	0.8920	0.8921	0.8922	0.8922
41	0.8921	0.8923	0.8924	0.8925	0.8927	0.8928	0.8929	0.8930	0.8931	0.8931
42	0.8929	0.8931	0.8933	0.8934	0.8935	0.8937	0.8938	0.8939	0.8940	0.8941
43	0.8938	0.8940	0.8941	0.8943	0.8944	0.8946	0.8947	0.8948	0.8949	0.8950
44	0.8946	0.8948	0.8950	0.8952	0.8953	0.8955	0.8956	0.8958	0.8959	0.8960

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.8848	0.8848	0.8848	0.8848	0.8848	0.8848	0.8849	0.8849	0.8849	0.8849
31	0.8854	0.8854	0.8854	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855
32	0.8861	0.8861	0.8861	0.8861	0.8861	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8867	0.8868	0.8868	0.8868	0.8868	0.8869	0.8869	0.8869	0.8869	0.8869
34	0.8875	0.8875	0.8875	0.8875	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876
35	0.8882	0.8882	0.8883	0.8883	0.8883	0.8883	0.8884	0.8884	0.8884	0.8884
36	0.8890	0.8890	0.8890	0.8891	0.8891	0.8891	0.8891	0.8892	0.8892	0.8892
37	0.8898	0.8898	0.8898	0.8899	0.8899	0.8899	0.8900	0.8900	0.8900	0.8900
38	0.8906	0.8906	0.8907	0.8907	0.8907	0.8908	0.8908	0.8908	0.8908	0.8909
39	0.8914	0.8915	0.8915	0.8916	0.8916	0.8916	0.8917	0.8917	0.8917	0.8917
40	0.8923	0.8924	0.8924	0.8925	0.8925	0.8925	0.8926	0.8926	0.8926	0.8926
41	0.8932	0.8933	0.8933	0.8934	0.8934	0.8935	0.8935	0.8935	0.8936	0.8936
42	0.8941	0.8942	0.8943	0.8943	0.8944	0.8944	0.8945	0.8945	0.8945	0.8946
43	0.8951	0.8952	0.8952	0.8953	0.8954	0.8954	0.8955	0.8955	0.8955	0.8956
44	0.8961	0.8962	0.8962	0.8963	0.8964	0.8964	0.8965	0.8965	0.8966	0.8966

Age	80	81	82	83	84	85	86	87	88	89
30	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
31	0.8855	0.8855	0.8855	0.8855	0.8855	0.8856	0.8856	0.8856	0.8856	0.8856
32	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
34	0.8876	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877
35	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
36	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
37	0.8900	0.8900	0.8900	0.8900	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901
38	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909
39	0.8917	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918
40	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927
41	0.8936	0.8936	0.8936	0.8936	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937
42	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8947	0.8947	0.8947
43	0.8956	0.8956	0.8956	0.8956	0.8956	0.8957	0.8957	0.8957	0.8957	0.8957
44	0.8966	0.8966	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.8830	0.8835	0.8839	0.8844	0.8849	0.8854	0.8859	0.8864	0.8869	0.8873
46	0.8831	0.8836	0.8841	0.8846	0.8851	0.8856	0.8861	0.8866	0.8871	0.8876
47	0.8833	0.8838	0.8843	0.8848	0.8853	0.8858	0.8863	0.8869	0.8874	0.8879
48	0.8834	0.8839	0.8844	0.8849	0.8855	0.8860	0.8865	0.8871	0.8877	0.8882
49	0.8835	0.8840	0.8846	0.8851	0.8856	0.8862	0.8868	0.8873	0.8879	0.8885
50	0.8836	0.8842	0.8847	0.8852	0.8858	0.8864	0.8870	0.8875	0.8881	0.8887
51	0.8837	0.8843	0.8848	0.8854	0.8860	0.8865	0.8871	0.8877	0.8884	0.8890
52	0.8838	0.8844	0.8850	0.8855	0.8861	0.8867	0.8873	0.8879	0.8886	0.8892
53	0.8839	0.8845	0.8851	0.8856	0.8862	0.8869	0.8875	0.8881	0.8888	0.8894
54	0.8840	0.8846	0.8852	0.8858	0.8864	0.8870	0.8876	0.8883	0.8890	0.8896
55	0.8841	0.8847	0.8853	0.8859	0.8865	0.8871	0.8878	0.8885	0.8891	0.8898
56	0.8842	0.8848	0.8854	0.8860	0.8866	0.8873	0.8879	0.8886	0.8893	0.8900
57	0.8843	0.8849	0.8855	0.8861	0.8867	0.8874	0.8881	0.8887	0.8895	0.8902
58	0.8843	0.8849	0.8855	0.8862	0.8868	0.8875	0.8882	0.8889	0.8896	0.8903
59	0.8844	0.8850	0.8856	0.8863	0.8869	0.8876	0.8883	0.8890	0.8897	0.8905

Age	40	41	42	43	44	45	46	47	48	49
45	0.8878	0.8883	0.8888	0.8893	0.8897	0.8902	0.8907	0.8911	0.8915	0.8919
46	0.8882	0.8887	0.8892	0.8897	0.8902	0.8907	0.8911	0.8916	0.8921	0.8925
47	0.8885	0.8890	0.8895	0.8901	0.8906	0.8911	0.8916	0.8921	0.8926	0.8931
48	0.8888	0.8893	0.8899	0.8904	0.8910	0.8915	0.8921	0.8926	0.8931	0.8936
49	0.8891	0.8896	0.8902	0.8908	0.8914	0.8920	0.8925	0.8931	0.8936	0.8942
50	0.8893	0.8899	0.8906	0.8912	0.8918	0.8924	0.8930	0.8936	0.8941	0.8947
51	0.8896	0.8902	0.8909	0.8915	0.8921	0.8928	0.8934	0.8940	0.8946	0.8952
52	0.8899	0.8905	0.8912	0.8918	0.8925	0.8931	0.8938	0.8944	0.8951	0.8957
53	0.8901	0.8908	0.8914	0.8921	0.8928	0.8935	0.8942	0.8949	0.8955	0.8962
54	0.8903	0.8910	0.8917	0.8924	0.8931	0.8939	0.8946	0.8953	0.8960	0.8967
55	0.8905	0.8913	0.8920	0.8927	0.8934	0.8942	0.8949	0.8957	0.8964	0.8971
56	0.8907	0.8915	0.8922	0.8930	0.8937	0.8945	0.8953	0.8960	0.8968	0.8976
57	0.8909	0.8917	0.8924	0.8932	0.8940	0.8948	0.8956	0.8964	0.8972	0.8980
58	0.8911	0.8919	0.8927	0.8935	0.8943	0.8951	0.8959	0.8967	0.8976	0.8984
59	0.8913	0.8921	0.8929	0.8937	0.8945	0.8953	0.8962	0.8970	0.8979	0.8988

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.8923	0.8927	0.8931	0.8934	0.8938	0.8941	0.8944	0.8947	0.8950	0.8952
46	0.8929	0.8934	0.8937	0.8941	0.8945	0.8948	0.8952	0.8955	0.8958	0.8961
47	0.8935	0.8940	0.8944	0.8948	0.8952	0.8956	0.8960	0.8963	0.8966	0.8969
48	0.8941	0.8946	0.8951	0.8955	0.8959	0.8963	0.8967	0.8971	0.8975	0.8978
49	0.8947	0.8952	0.8957	0.8962	0.8966	0.8971	0.8975	0.8979	0.8983	0.8986
50	0.8953	0.8958	0.8963	0.8968	0.8973	0.8978	0.8983	0.8987	0.8991	0.8995
51	0.8958	0.8964	0.8969	0.8975	0.8980	0.8985	0.8990	0.8995	0.8999	0.9004
52	0.8963	0.8970	0.8976	0.8981	0.8987	0.8992	0.8998	0.9003	0.9008	0.9012
53	0.8969	0.8975	0.8981	0.8988	0.8994	0.9000	0.9005	0.9011	0.9016	0.9021
54	0.8974	0.8981	0.8987	0.8994	0.9000	0.9006	0.9012	0.9018	0.9024	0.9029
55	0.8979	0.8986	0.8993	0.9000	0.9007	0.9013	0.9020	0.9026	0.9032	0.9038
56	0.8983	0.8991	0.8998	0.9006	0.9013	0.9020	0.9027	0.9033	0.9040	0.9046
57	0.8988	0.8996	0.9003	0.9011	0.9019	0.9026	0.9033	0.9040	0.9047	0.9054
58	0.8992	0.9000	0.9008	0.9016	0.9024	0.9032	0.9040	0.9047	0.9055	0.9062
59	0.8996	0.9005	0.9013	0.9022	0.9030	0.9038	0.9046	0.9054	0.9062	0.9069

Age	60	61	62	63	64	65	66	67	68	69
45	0.8955	0.8957	0.8959	0.8961	0.8963	0.8964	0.8966	0.8967	0.8969	0.8970
46	0.8963	0.8966	0.8968	0.8970	0.8972	0.8974	0.8976	0.8977	0.8979	0.8980
47	0.8972	0.8975	0.8977	0.8980	0.8982	0.8984	0.8986	0.8988	0.8989	0.8991
48	0.8981	0.8984	0.8987	0.8989	0.8992	0.8994	0.8996	0.8998	0.9000	0.9001
49	0.8990	0.8993	0.8996	0.8999	0.9002	0.9004	0.9006	0.9009	0.9010	0.9012
50	0.8999	0.9002	0.9006	0.9009	0.9012	0.9014	0.9017	0.9019	0.9021	0.9023
51	0.9008	0.9012	0.9015	0.9019	0.9022	0.9025	0.9028	0.9030	0.9033	0.9035
52	0.9017	0.9021	0.9025	0.9029	0.9032	0.9035	0.9038	0.9041	0.9044	0.9046
53	0.9026	0.9030	0.9035	0.9039	0.9042	0.9046	0.9049	0.9052	0.9055	0.9058
54	0.9034	0.9039	0.9044	0.9048	0.9053	0.9057	0.9060	0.9064	0.9067	0.9070
55	0.9043	0.9049	0.9054	0.9058	0.9063	0.9067	0.9071	0.9075	0.9078	0.9081
56	0.9052	0.9058	0.9063	0.9068	0.9073	0.9078	0.9082	0.9086	0.9090	0.9093
57	0.9060	0.9066	0.9072	0.9078	0.9083	0.9088	0.9093	0.9097	0.9101	0.9105
58	0.9069	0.9075	0.9081	0.9087	0.9093	0.9099	0.9104	0.9109	0.9113	0.9117
59	0.9077	0.9084	0.9090	0.9097	0.9103	0.9109	0.9115	0.9120	0.9125	0.9129

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member	Beneficiary									
Age	70	71	72	73	74	75	76	77	78	79
45	0.8971	0.8972	0.8973	0.8974	0.8974	0.8975	0.8975	0.8976	0.8976	0.8977
46	0.8981	0.8982	0.8983	0.8984	0.8985	0.8986	0.8986	0.8987	0.8987	0.8988
47	0.8992	0.8993	0.8994	0.8995	0.8996	0.8997	0.8997	0.8998	0.8998	0.8999
48	0.9003	0.9004	0.9005	0.9006	0.9007	0.9008	0.9009	0.9009	0.9010	0.9011
49	0.9014	0.9015	0.9017	0.9018	0.9019	0.9020	0.9021	0.9021	0.9022	0.9022
50	0.9025	0.9027	0.9028	0.9029	0.9031	0.9032	0.9033	0.9033	0.9034	0.9035
51	0.9037	0.9038	0.9040	0.9041	0.9043	0.9044	0.9045	0.9046	0.9047	0.9047
52	0.9048	0.9050	0.9052	0.9054	0.9055	0.9056	0.9058	0.9059	0.9059	0.9060
53	0.9060	0.9062	0.9064	0.9066	0.9068	0.9069	0.9070	0.9072	0.9073	0.9073
54	0.9072	0.9075	0.9077	0.9079	0.9081	0.9082	0.9084	0.9085	0.9086	0.9087
55	0.9084	0.9087	0.9089	0.9092	0.9094	0.9095	0.9097	0.9098	0.9100	0.9101
56	0.9097	0.9099	0.9102	0.9105	0.9107	0.9109	0.9111	0.9112	0.9113	0.9115
57	0.9109	0.9112	0.9115	0.9118	0.9120	0.9122	0.9124	0.9126	0.9128	0.9129
58	0.9121	0.9125	0.9128	0.9131	0.9134	0.9136	0.9138	0.9140	0.9142	0.9143
59	0.9133	0.9137	0.9141	0.9144	0.9147	0.9150	0.9152	0.9155	0.9156	0.9158

Age	80	81	82	83	84	85	86	87	88	89
45	0.8977	0.8977	0.8977	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978
46	0.8988	0.8988	0.8988	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989
47	0.8999	0.9000	0.9000	0.9000	0.9000	0.9000	0.9001	0.9001	0.9001	0.9001
48	0.9011	0.9011	0.9012	0.9012	0.9012	0.9012	0.9012	0.9012	0.9013	0.9013
49	0.9023	0.9023	0.9024	0.9024	0.9024	0.9024	0.9025	0.9025	0.9025	0.9025
50	0.9035	0.9036	0.9036	0.9036	0.9037	0.9037	0.9037	0.9037	0.9037	0.9037
51	0.9048	0.9048	0.9049	0.9049	0.9049	0.9050	0.9050	0.9050	0.9050	0.9050
52	0.9061	0.9061	0.9062	0.9062	0.9063	0.9063	0.9063	0.9063	0.9063	0.9064
53	0.9074	0.9075	0.9075	0.9076	0.9076	0.9076	0.9077	0.9077	0.9077	0.9077
54	0.9088	0.9088	0.9089	0.9090	0.9090	0.9090	0.9091	0.9091	0.9091	0.9091
55	0.9102	0.9102	0.9103	0.9104	0.9104	0.9105	0.9105	0.9105	0.9105	0.9106
56	0.9116	0.9117	0.9117	0.9118	0.9119	0.9119	0.9119	0.9120	0.9120	0.9120
57	0.9130	0.9131	0.9132	0.9133	0.9133	0.9134	0.9134	0.9135	0.9135	0.9135
58	0.9145	0.9146	0.9147	0.9148	0.9149	0.9149	0.9150	0.9150	0.9150	0.9151
59	0.9160	0.9161	0.9162	0.9163	0.9164	0.9165	0.9165	0.9166	0.9166	0.9166

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member		Beneficiary									
Age		30	31	32	33	34	35	36	37	38	39
	60	0.8845	0.8851	0.8857	0.8863	0.8870	0.8877	0.8884	0.8891	0.8899	0.8906
	61	0.8845	0.8851	0.8857	0.8864	0.8871	0.8878	0.8885	0.8892	0.8900	0.8908
	62	0.8846	0.8852	0.8858	0.8865	0.8871	0.8879	0.8886	0.8893	0.8901	0.8909
	63	0.8846	0.8852	0.8859	0.8865	0.8872	0.8879	0.8887	0.8894	0.8902	0.8910
	64	0.8846	0.8853	0.8859	0.8866	0.8873	0.8880	0.8887	0.8895	0.8903	0.8911
	65	0.8847	0.8853	0.8860	0.8866	0.8873	0.8881	0.8888	0.8896	0.8904	0.8912
	66	0.8847	0.8854	0.8860	0.8867	0.8874	0.8881	0.8889	0.8896	0.8905	0.8913
	67	0.8848	0.8854	0.8860	0.8867	0.8874	0.8882	0.8889	0.8897	0.8905	0.8914
	68	0.8848	0.8854	0.8861	0.8868	0.8875	0.8882	0.8890	0.8898	0.8906	0.8914
	69	0.8848	0.8854	0.8861	0.8868	0.8875	0.8883	0.8890	0.8898	0.8906	0.8915
	70	0.8848	0.8855	0.8861	0.8868	0.8876	0.8883	0.8891	0.8899	0.8907	0.8916
	71	0.8849	0.8855	0.8862	0.8869	0.8876	0.8883	0.8891	0.8899	0.8907	0.8916
	72	0.8849	0.8855	0.8862	0.8869	0.8876	0.8884	0.8891	0.8900	0.8908	0.8917
	73	0.8849	0.8855	0.8862	0.8869	0.8876	0.8884	0.8892	0.8900	0.8908	0.8917
	74	0.8849	0.8856	0.8862	0.8869	0.8877	0.8884	0.8892	0.8900	0.8909	0.8917

Age		40	41	42	43	44	45	46	47	48	49
	60	0.8914	0.8922	0.8930	0.8939	0.8947	0.8956	0.8965	0.8973	0.8982	0.8991
	61	0.8916	0.8924	0.8932	0.8941	0.8949	0.8958	0.8967	0.8976	0.8985	0.8994
	62	0.8917	0.8925	0.8934	0.8943	0.8951	0.8960	0.8970	0.8979	0.8988	0.8998
	63	0.8918	0.8927	0.8935	0.8944	0.8953	0.8962	0.8972	0.8981	0.8991	0.9001
	64	0.8919	0.8928	0.8937	0.8946	0.8955	0.8964	0.8974	0.8984	0.8993	0.9003
	65	0.8920	0.8929	0.8938	0.8947	0.8956	0.8966	0.8976	0.8986	0.8996	0.9006
	66	0.8921	0.8930	0.8939	0.8948	0.8958	0.8968	0.8978	0.8988	0.8998	0.9008
	67	0.8922	0.8931	0.8940	0.8950	0.8959	0.8969	0.8979	0.8989	0.9000	0.9010
	68	0.8923	0.8932	0.8941	0.8951	0.8960	0.8970	0.8981	0.8991	0.9002	0.9012
	69	0.8924	0.8933	0.8942	0.8952	0.8962	0.8972	0.8982	0.8992	0.9003	0.9014
	70	0.8924	0.8934	0.8943	0.8953	0.8963	0.8973	0.8983	0.8994	0.9005	0.9016
	71	0.8925	0.8934	0.8944	0.8953	0.8963	0.8974	0.8984	0.8995	0.9006	0.9017
	72	0.8926	0.8935	0.8944	0.8954	0.8964	0.8975	0.8985	0.8996	0.9007	0.9019
	73	0.8926	0.8935	0.8945	0.8955	0.8965	0.8975	0.8986	0.8997	0.9008	0.9020
	74	0.8926	0.8936	0.8945	0.8955	0.8966	0.8976	0.8987	0.8998	0.9010	0.9021

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.9000	0.9009	0.9018	0.9027	0.9035	0.9044	0.9052	0.9061	0.9069	0.9077
61	0.9004	0.9013	0.9022	0.9031	0.9040	0.9049	0.9058	0.9067	0.9076	0.9084
62	0.9007	0.9017	0.9026	0.9036	0.9045	0.9054	0.9064	0.9073	0.9082	0.9091
63	0.9010	0.9020	0.9030	0.9040	0.9050	0.9059	0.9069	0.9079	0.9088	0.9097
64	0.9013	0.9023	0.9034	0.9044	0.9054	0.9064	0.9074	0.9084	0.9094	0.9104
65	0.9016	0.9026	0.9037	0.9047	0.9058	0.9068	0.9079	0.9089	0.9100	0.9110
66	0.9019	0.9029	0.9040	0.9051	0.9062	0.9072	0.9083	0.9094	0.9105	0.9115
67	0.9021	0.9032	0.9043	0.9054	0.9065	0.9076	0.9087	0.9099	0.9110	0.9121
68	0.9023	0.9034	0.9046	0.9057	0.9068	0.9080	0.9091	0.9103	0.9114	0.9126
69	0.9025	0.9037	0.9048	0.9060	0.9071	0.9083	0.9095	0.9107	0.9119	0.9130
70	0.9027	0.9039	0.9050	0.9062	0.9074	0.9086	0.9098	0.9110	0.9123	0.9135
71	0.9029	0.9041	0.9052	0.9064	0.9077	0.9089	0.9101	0.9114	0.9126	0.9139
72	0.9030	0.9042	0.9054	0.9067	0.9079	0.9092	0.9104	0.9117	0.9130	0.9143
73	0.9032	0.9044	0.9056	0.9068	0.9081	0.9094	0.9107	0.9120	0.9133	0.9146
74	0.9033	0.9045	0.9058	0.9070	0.9083	0.9096	0.9109	0.9122	0.9136	0.9149

Age	60	61	62	63	64	65	66	67	68	69
60	0.9085	0.9092	0.9099	0.9106	0.9113	0.9119	0.9125	0.9131	0.9136	0.9141
61	0.9092	0.9100	0.9108	0.9115	0.9122	0.9129	0.9136	0.9142	0.9147	0.9153
62	0.9099	0.9108	0.9116	0.9124	0.9132	0.9139	0.9146	0.9152	0.9159	0.9164
63	0.9107	0.9115	0.9124	0.9132	0.9141	0.9148	0.9156	0.9163	0.9169	0.9176
64	0.9113	0.9123	0.9132	0.9141	0.9149	0.9157	0.9165	0.9173	0.9180	0.9187
65	0.9120	0.9130	0.9139	0.9149	0.9158	0.9166	0.9175	0.9183	0.9191	0.9198
66	0.9126	0.9136	0.9146	0.9156	0.9166	0.9175	0.9184	0.9192	0.9201	0.9209
67	0.9132	0.9142	0.9153	0.9163	0.9173	0.9183	0.9193	0.9202	0.9210	0.9219
68	0.9137	0.9148	0.9159	0.9170	0.9181	0.9191	0.9201	0.9211	0.9220	0.9229
69	0.9142	0.9154	0.9165	0.9177	0.9188	0.9198	0.9209	0.9219	0.9229	0.9238
70	0.9147	0.9159	0.9171	0.9183	0.9194	0.9206	0.9217	0.9227	0.9238	0.9248
71	0.9151	0.9164	0.9176	0.9188	0.9200	0.9212	0.9224	0.9235	0.9246	0.9256
72	0.9156	0.9168	0.9181	0.9194	0.9206	0.9219	0.9231	0.9242	0.9254	0.9265
73	0.9159	0.9173	0.9186	0.9199	0.9212	0.9224	0.9237	0.9249	0.9261	0.9272
74	0.9163	0.9176	0.9190	0.9203	0.9217	0.9230	0.9243	0.9255	0.9268	0.9280

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member						Beneficiary					
Age		70	71	72	73	74	75	76	77	78	79
	60	0.9146	0.9150	0.9154	0.9158	0.9161	0.9164	0.9167	0.9169	0.9171	0.9173
	61	0.9158	0.9163	0.9167	0.9171	0.9174	0.9178	0.9181	0.9184	0.9186	0.9188
	62	0.9170	0.9175	0.9180	0.9184	0.9188	0.9192	0.9195	0.9198	0.9201	0.9203
	63	0.9182	0.9187	0.9192	0.9197	0.9202	0.9206	0.9209	0.9213	0.9216	0.9218
	64	0.9193	0.9199	0.9205	0.9210	0.9215	0.9219	0.9224	0.9227	0.9230	0.9233
	65	0.9205	0.9211	0.9217	0.9223	0.9228	0.9233	0.9238	0.9242	0.9245	0.9249
	66	0.9216	0.9223	0.9230	0.9236	0.9241	0.9247	0.9251	0.9256	0.9260	0.9264
	67	0.9227	0.9234	0.9241	0.9248	0.9254	0.9260	0.9265	0.9270	0.9274	0.9278
	68	0.9237	0.9245	0.9253	0.9260	0.9267	0.9273	0.9279	0.9284	0.9289	0.9293
	69	0.9247	0.9256	0.9264	0.9272	0.9279	0.9286	0.9292	0.9298	0.9303	0.9308
	70	0.9257	0.9266	0.9275	0.9283	0.9291	0.9298	0.9305	0.9311	0.9317	0.9322
	71	0.9266	0.9276	0.9285	0.9294	0.9302	0.9310	0.9317	0.9324	0.9330	0.9336
	72	0.9275	0.9285	0.9295	0.9304	0.9313	0.9321	0.9329	0.9337	0.9343	0.9349
	73	0.9284	0.9294	0.9305	0.9314	0.9324	0.9333	0.9341	0.9349	0.9356	0.9363
	74	0.9292	0.9303	0.9314	0.9324	0.9334	0.9343	0.9352	0.9360	0.9368	0.9375

Age		80	81	82	83	84	85	86	87	88	89
	60	0.9175	0.9176	0.9177	0.9179	0.9180	0.9180	0.9181	0.9182	0.9182	0.9182
	61	0.9190	0.9192	0.9193	0.9194	0.9195	0.9196	0.9197	0.9198	0.9198	0.9199
	62	0.9205	0.9207	0.9209	0.9210	0.9211	0.9212	0.9213	0.9214	0.9215	0.9215
	63	0.9221	0.9223	0.9225	0.9226	0.9228	0.9229	0.9230	0.9231	0.9231	0.9232
	64	0.9236	0.9238	0.9240	0.9242	0.9244	0.9245	0.9246	0.9247	0.9248	0.9249
	65	0.9251	0.9254	0.9256	0.9258	0.9260	0.9262	0.9263	0.9264	0.9265	0.9266
	66	0.9267	0.9270	0.9272	0.9275	0.9277	0.9278	0.9280	0.9281	0.9282	0.9283
	67	0.9282	0.9285	0.9288	0.9291	0.9293	0.9295	0.9297	0.9298	0.9299	0.9300
	68	0.9297	0.9301	0.9304	0.9307	0.9309	0.9312	0.9313	0.9315	0.9316	0.9318
	69	0.9312	0.9316	0.9320	0.9323	0.9326	0.9328	0.9330	0.9332	0.9334	0.9335
	70	0.9327	0.9331	0.9335	0.9339	0.9342	0.9344	0.9347	0.9349	0.9351	0.9352
	71	0.9341	0.9346	0.9350	0.9354	0.9358	0.9361	0.9363	0.9366	0.9368	0.9370
	72	0.9355	0.9360	0.9365	0.9369	0.9373	0.9377	0.9380	0.9382	0.9385	0.9387
	73	0.9369	0.9374	0.9380	0.9384	0.9388	0.9392	0.9396	0.9399	0.9401	0.9404
	74	0.9382	0.9388	0.9394	0.9399	0.9403	0.9408	0.9411	0.9415	0.9418	0.9420

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.8849	0.8856	0.8862	0.8870	0.8877	0.8884	0.8892	0.8900	0.8909	0.8918
76	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8909	0.8918
77	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8909	0.8918
78	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8918
79	0.8850	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
80	0.8850	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
81	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8901	0.8910	0.8919
82	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
83	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
84	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
85	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
86	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
87	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
88	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919
89	0.8850	0.8856	0.8863	0.8870	0.8878	0.8885	0.8893	0.8902	0.8910	0.8919

Age	40	41	42	43	44	45	46	47	48	49
75	0.8927	0.8936	0.8946	0.8956	0.8966	0.8977	0.8988	0.8999	0.9010	0.9022
76	0.8927	0.8937	0.8946	0.8956	0.8967	0.8977	0.8988	0.9000	0.9011	0.9023
77	0.8927	0.8937	0.8947	0.8957	0.8967	0.8978	0.8989	0.9000	0.9012	0.9024
78	0.8928	0.8937	0.8947	0.8957	0.8968	0.8978	0.8989	0.9001	0.9013	0.9025
79	0.8928	0.8937	0.8947	0.8957	0.8968	0.8979	0.8990	0.9001	0.9013	0.9025
80	0.8928	0.8938	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
81	0.8928	0.8938	0.8948	0.8958	0.8968	0.8979	0.8991	0.9002	0.9014	0.9026
82	0.8928	0.8938	0.8948	0.8958	0.8969	0.8980	0.8991	0.9002	0.9014	0.9027
83	0.8928	0.8938	0.8948	0.8958	0.8969	0.8980	0.8991	0.9003	0.9015	0.9027
84	0.8929	0.8938	0.8948	0.8958	0.8969	0.8980	0.8991	0.9003	0.9015	0.9027
85	0.8929	0.8938	0.8948	0.8958	0.8969	0.8980	0.8991	0.9003	0.9015	0.9027
86	0.8929	0.8938	0.8948	0.8959	0.8969	0.8980	0.8992	0.9003	0.9015	0.9028
87	0.8929	0.8938	0.8948	0.8959	0.8969	0.8980	0.8992	0.9003	0.9015	0.9028
88	0.8929	0.8938	0.8948	0.8959	0.8969	0.8980	0.8992	0.9003	0.9015	0.9028
89	0.8929	0.8938	0.8948	0.8959	0.8969	0.8980	0.8992	0.9003	0.9015	0.9028

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
75	0.9034	0.9046	0.9059	0.9072	0.9085	0.9098	0.9111	0.9125	0.9138	0.9152
76	0.9035	0.9048	0.9060	0.9073	0.9086	0.9100	0.9113	0.9127	0.9141	0.9155
77	0.9036	0.9049	0.9061	0.9074	0.9088	0.9101	0.9115	0.9129	0.9143	0.9157
78	0.9037	0.9049	0.9062	0.9075	0.9089	0.9103	0.9116	0.9131	0.9145	0.9159
79	0.9038	0.9050	0.9063	0.9076	0.9090	0.9104	0.9118	0.9132	0.9147	0.9161
80	0.9038	0.9051	0.9064	0.9077	0.9091	0.9105	0.9119	0.9134	0.9148	0.9163
81	0.9039	0.9051	0.9065	0.9078	0.9092	0.9106	0.9120	0.9135	0.9150	0.9165
82	0.9039	0.9052	0.9065	0.9079	0.9093	0.9107	0.9121	0.9136	0.9151	0.9166
83	0.9039	0.9052	0.9066	0.9079	0.9093	0.9107	0.9122	0.9137	0.9152	0.9167
84	0.9040	0.9053	0.9066	0.9080	0.9094	0.9108	0.9123	0.9137	0.9153	0.9168
85	0.9040	0.9053	0.9066	0.9080	0.9094	0.9108	0.9123	0.9138	0.9153	0.9169
86	0.9040	0.9053	0.9067	0.9080	0.9095	0.9109	0.9124	0.9139	0.9154	0.9170
87	0.9040	0.9054	0.9067	0.9081	0.9095	0.9109	0.9124	0.9139	0.9155	0.9170
88	0.9041	0.9054	0.9067	0.9081	0.9095	0.9110	0.9124	0.9140	0.9155	0.9171
89	0.9041	0.9054	0.9067	0.9081	0.9095	0.9110	0.9125	0.9140	0.9155	0.9171

Age	60	61	62	63	64	65	66	67	68	69
75	0.9166	0.9180	0.9194	0.9208	0.9221	0.9235	0.9248	0.9261	0.9274	0.9287
76	0.9169	0.9183	0.9197	0.9212	0.9226	0.9240	0.9253	0.9267	0.9280	0.9293
77	0.9172	0.9186	0.9201	0.9215	0.9230	0.9244	0.9258	0.9272	0.9286	0.9299
78	0.9174	0.9189	0.9204	0.9218	0.9233	0.9248	0.9262	0.9277	0.9291	0.9305
79	0.9176	0.9191	0.9206	0.9221	0.9236	0.9252	0.9266	0.9281	0.9296	0.9310
80	0.9178	0.9193	0.9209	0.9224	0.9239	0.9255	0.9270	0.9285	0.9300	0.9315
81	0.9180	0.9195	0.9211	0.9226	0.9242	0.9258	0.9273	0.9289	0.9304	0.9319
82	0.9181	0.9197	0.9213	0.9229	0.9244	0.9260	0.9276	0.9292	0.9308	0.9323
83	0.9183	0.9198	0.9214	0.9230	0.9247	0.9263	0.9279	0.9295	0.9311	0.9327
84	0.9184	0.9200	0.9216	0.9232	0.9249	0.9265	0.9281	0.9298	0.9314	0.9330
85	0.9185	0.9201	0.9217	0.9234	0.9250	0.9267	0.9284	0.9300	0.9317	0.9333
86	0.9186	0.9202	0.9218	0.9235	0.9252	0.9269	0.9285	0.9302	0.9319	0.9336
87	0.9186	0.9203	0.9219	0.9236	0.9253	0.9270	0.9287	0.9304	0.9321	0.9338
88	0.9187	0.9203	0.9220	0.9237	0.9254	0.9271	0.9288	0.9306	0.9323	0.9340
89	0.9188	0.9204	0.9221	0.9238	0.9255	0.9272	0.9290	0.9307	0.9325	0.9342

Table 3a - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.9299	0.9311	0.9322	0.9333	0.9343	0.9353	0.9363	0.9372	0.9380	0.9388
76	0.9306	0.9318	0.9330	0.9342	0.9353	0.9363	0.9373	0.9382	0.9391	0.9399
77	0.9312	0.9325	0.9338	0.9350	0.9361	0.9372	0.9383	0.9392	0.9402	0.9411
78	0.9319	0.9332	0.9345	0.9357	0.9369	0.9381	0.9392	0.9402	0.9412	0.9421
79	0.9324	0.9338	0.9351	0.9364	0.9377	0.9389	0.9400	0.9411	0.9422	0.9431
80	0.9329	0.9344	0.9357	0.9371	0.9384	0.9396	0.9408	0.9420	0.9431	0.9441
81	0.9334	0.9349	0.9363	0.9377	0.9390	0.9403	0.9416	0.9428	0.9439	0.9450
82	0.9339	0.9354	0.9368	0.9383	0.9396	0.9410	0.9423	0.9435	0.9447	0.9459
83	0.9343	0.9358	0.9373	0.9388	0.9402	0.9416	0.9429	0.9442	0.9455	0.9467
84	0.9346	0.9362	0.9377	0.9393	0.9407	0.9422	0.9436	0.9449	0.9462	0.9474
85	0.9349	0.9366	0.9381	0.9397	0.9412	0.9427	0.9441	0.9455	0.9468	0.9481
86	0.9352	0.9369	0.9385	0.9401	0.9416	0.9432	0.9446	0.9461	0.9474	0.9488
87	0.9355	0.9372	0.9388	0.9404	0.9420	0.9436	0.9451	0.9466	0.9480	0.9494
88	0.9357	0.9374	0.9391	0.9408	0.9424	0.9440	0.9455	0.9470	0.9485	0.9499
89	0.9359	0.9377	0.9394	0.9410	0.9427	0.9443	0.9459	0.9475	0.9490	0.9504

Age	80	81	82	83	84	85	86	87	88	89
75	0.9395	0.9401	0.9407	0.9413	0.9418	0.9423	0.9427	0.9430	0.9434	0.9437
76	0.9407	0.9414	0.9421	0.9427	0.9432	0.9437	0.9442	0.9446	0.9449	0.9453
77	0.9419	0.9426	0.9433	0.9440	0.9446	0.9451	0.9456	0.9461	0.9465	0.9468
78	0.9430	0.9438	0.9446	0.9453	0.9459	0.9465	0.9470	0.9475	0.9480	0.9484
79	0.9441	0.9449	0.9457	0.9465	0.9472	0.9478	0.9484	0.9489	0.9494	0.9498
80	0.9451	0.9460	0.9468	0.9476	0.9484	0.9491	0.9497	0.9503	0.9508	0.9513
81	0.9460	0.9470	0.9479	0.9488	0.9495	0.9503	0.9509	0.9516	0.9521	0.9526
82	0.9469	0.9480	0.9489	0.9498	0.9506	0.9514	0.9521	0.9528	0.9534	0.9540
83	0.9478	0.9489	0.9499	0.9508	0.9517	0.9525	0.9533	0.9540	0.9547	0.9553
84	0.9486	0.9497	0.9508	0.9517	0.9527	0.9536	0.9544	0.9551	0.9558	0.9565
85	0.9493	0.9505	0.9516	0.9526	0.9536	0.9545	0.9554	0.9562	0.9570	0.9577
86	0.9500	0.9512	0.9524	0.9535	0.9545	0.9555	0.9564	0.9572	0.9580	0.9588
87	0.9507	0.9519	0.9531	0.9543	0.9553	0.9563	0.9573	0.9582	0.9591	0.9599
88	0.9513	0.9526	0.9538	0.9550	0.9561	0.9572	0.9582	0.9591	0.9600	0.9609
89	0.9518	0.9531	0.9544	0.9557	0.9568	0.9579	0.9590	0.9600	0.9609	0.9618

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	100% Joint and Survivor Annuity with Pop-Up

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.7643	0.7648	0.7653	0.7657	0.7662	0.7666	0.7671	0.7675	0.7679	0.7683
31	0.7648	0.7653	0.7658	0.7663	0.7668	0.7673	0.7678	0.7682	0.7687	0.7691
32	0.7653	0.7658	0.7664	0.7669	0.7674	0.7680	0.7685	0.7689	0.7694	0.7699
33	0.7658	0.7663	0.7669	0.7675	0.7681	0.7686	0.7691	0.7697	0.7702	0.7706
34	0.7662	0.7668	0.7675	0.7681	0.7687	0.7692	0.7698	0.7704	0.7709	0.7714
35	0.7667	0.7673	0.7680	0.7686	0.7692	0.7699	0.7705	0.7711	0.7716	0.7722
36	0.7671	0.7678	0.7685	0.7692	0.7698	0.7705	0.7711	0.7718	0.7724	0.7730
37	0.7675	0.7682	0.7690	0.7697	0.7704	0.7711	0.7718	0.7724	0.7731	0.7737
38	0.7679	0.7687	0.7694	0.7702	0.7709	0.7717	0.7724	0.7731	0.7738	0.7745
39	0.7683	0.7691	0.7699	0.7707	0.7715	0.7722	0.7730	0.7738	0.7745	0.7752
40	0.7687	0.7695	0.7703	0.7712	0.7720	0.7728	0.7736	0.7744	0.7752	0.7760
41	0.7691	0.7699	0.7708	0.7716	0.7725	0.7733	0.7742	0.7750	0.7758	0.7767
42	0.7694	0.7703	0.7712	0.7721	0.7730	0.7738	0.7747	0.7756	0.7765	0.7774
43	0.7697	0.7706	0.7716	0.7725	0.7734	0.7743	0.7753	0.7762	0.7771	0.7780
44	0.7701	0.7710	0.7719	0.7729	0.7738	0.7748	0.7758	0.7767	0.7777	0.7787

Age	40	41	42	43	44	45	46	47	48	49
30	0.7687	0.7690	0.7693	0.7697	0.7700	0.7703	0.7705	0.7708	0.7710	0.7713
31	0.7695	0.7699	0.7702	0.7706	0.7709	0.7712	0.7715	0.7718	0.7721	0.7723
32	0.7703	0.7707	0.7711	0.7715	0.7719	0.7722	0.7725	0.7728	0.7731	0.7734
33	0.7711	0.7716	0.7720	0.7724	0.7728	0.7732	0.7736	0.7739	0.7742	0.7745
34	0.7719	0.7724	0.7729	0.7734	0.7738	0.7742	0.7746	0.7750	0.7753	0.7756
35	0.7728	0.7733	0.7738	0.7743	0.7748	0.7752	0.7756	0.7760	0.7764	0.7768
36	0.7736	0.7741	0.7747	0.7752	0.7757	0.7762	0.7767	0.7771	0.7775	0.7779
37	0.7744	0.7750	0.7756	0.7761	0.7767	0.7772	0.7777	0.7782	0.7787	0.7791
38	0.7752	0.7758	0.7765	0.7771	0.7777	0.7782	0.7788	0.7793	0.7798	0.7803
39	0.7760	0.7767	0.7773	0.7780	0.7786	0.7792	0.7798	0.7804	0.7809	0.7815
40	0.7767	0.7775	0.7782	0.7789	0.7796	0.7802	0.7809	0.7815	0.7821	0.7826
41	0.7775	0.7783	0.7790	0.7798	0.7805	0.7812	0.7819	0.7826	0.7832	0.7838
42	0.7782	0.7791	0.7799	0.7807	0.7815	0.7822	0.7830	0.7837	0.7844	0.7850
43	0.7789	0.7798	0.7807	0.7815	0.7824	0.7832	0.7840	0.7847	0.7855	0.7862
44	0.7796	0.7806	0.7815	0.7824	0.7833	0.7841	0.7850	0.7858	0.7866	0.7874

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.7715	0.7717	0.7719	0.7721	0.7722	0.7724	0.7725	0.7726	0.7728	0.7729
31	0.7726	0.7728	0.7730	0.7732	0.7734	0.7735	0.7737	0.7738	0.7740	0.7741
32	0.7737	0.7739	0.7741	0.7744	0.7746	0.7747	0.7749	0.7751	0.7752	0.7754
33	0.7748	0.7751	0.7753	0.7756	0.7758	0.7760	0.7762	0.7764	0.7765	0.7767
34	0.7760	0.7762	0.7765	0.7768	0.7770	0.7772	0.7775	0.7777	0.7778	0.7780
35	0.7771	0.7774	0.7777	0.7780	0.7783	0.7785	0.7788	0.7790	0.7792	0.7794
36	0.7783	0.7787	0.7790	0.7793	0.7796	0.7799	0.7801	0.7804	0.7806	0.7808
37	0.7795	0.7799	0.7803	0.7806	0.7809	0.7812	0.7815	0.7818	0.7820	0.7822
38	0.7807	0.7811	0.7815	0.7819	0.7823	0.7826	0.7829	0.7832	0.7835	0.7837
39	0.7819	0.7824	0.7828	0.7833	0.7836	0.7840	0.7844	0.7847	0.7850	0.7852
40	0.7832	0.7837	0.7842	0.7846	0.7850	0.7854	0.7858	0.7862	0.7865	0.7868
41	0.7844	0.7850	0.7855	0.7860	0.7864	0.7869	0.7873	0.7877	0.7880	0.7884
42	0.7856	0.7862	0.7868	0.7873	0.7879	0.7883	0.7888	0.7892	0.7896	0.7900
43	0.7869	0.7875	0.7881	0.7887	0.7893	0.7898	0.7903	0.7908	0.7912	0.7916
44	0.7881	0.7888	0.7895	0.7901	0.7907	0.7913	0.7918	0.7923	0.7928	0.7933

Age	60	61	62	63	64	65	66	67	68	69
30	0.7730	0.7731	0.7732	0.7733	0.7733	0.7734	0.7735	0.7735	0.7736	0.7736
31	0.7742	0.7743	0.7744	0.7745	0.7746	0.7747	0.7747	0.7748	0.7749	0.7749
32	0.7755	0.7756	0.7757	0.7758	0.7759	0.7760	0.7761	0.7761	0.7762	0.7763
33	0.7768	0.7769	0.7771	0.7772	0.7773	0.7774	0.7775	0.7775	0.7776	0.7777
34	0.7782	0.7783	0.7784	0.7786	0.7787	0.7788	0.7789	0.7790	0.7790	0.7791
35	0.7796	0.7797	0.7799	0.7800	0.7801	0.7802	0.7803	0.7804	0.7805	0.7806
36	0.7810	0.7812	0.7813	0.7815	0.7816	0.7817	0.7818	0.7820	0.7820	0.7821
37	0.7825	0.7826	0.7828	0.7830	0.7831	0.7833	0.7834	0.7835	0.7836	0.7837
38	0.7840	0.7842	0.7844	0.7846	0.7847	0.7849	0.7850	0.7851	0.7853	0.7854
39	0.7855	0.7857	0.7860	0.7862	0.7863	0.7865	0.7867	0.7868	0.7869	0.7871
40	0.7871	0.7873	0.7876	0.7878	0.7880	0.7882	0.7884	0.7885	0.7887	0.7888
41	0.7887	0.7890	0.7892	0.7895	0.7897	0.7899	0.7901	0.7903	0.7904	0.7906
42	0.7903	0.7906	0.7909	0.7912	0.7915	0.7917	0.7919	0.7921	0.7923	0.7924
43	0.7920	0.7923	0.7927	0.7930	0.7932	0.7935	0.7937	0.7939	0.7941	0.7943
44	0.7937	0.7941	0.7944	0.7948	0.7951	0.7953	0.7956	0.7958	0.7961	0.7962

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member	Beneficiary									
Age	70	71	72	73	74	75	76	77	78	79
30	0.7737	0.7737	0.7737	0.7738	0.7738	0.7738	0.7738	0.7738	0.7739	0.7739
31	0.7750	0.7750	0.7750	0.7751	0.7751	0.7751	0.7751	0.7752	0.7752	0.7752
32	0.7763	0.7764	0.7764	0.7764	0.7765	0.7765	0.7765	0.7765	0.7766	0.7766
33	0.7777	0.7778	0.7778	0.7778	0.7779	0.7779	0.7779	0.7780	0.7780	0.7780
34	0.7792	0.7792	0.7793	0.7793	0.7793	0.7794	0.7794	0.7794	0.7795	0.7795
35	0.7807	0.7807	0.7808	0.7808	0.7809	0.7809	0.7809	0.7810	0.7810	0.7810
36	0.7822	0.7823	0.7823	0.7824	0.7824	0.7825	0.7825	0.7825	0.7826	0.7826
37	0.7838	0.7839	0.7839	0.7840	0.7841	0.7841	0.7841	0.7842	0.7842	0.7842
38	0.7855	0.7855	0.7856	0.7857	0.7857	0.7858	0.7858	0.7859	0.7859	0.7859
39	0.7872	0.7872	0.7873	0.7874	0.7875	0.7875	0.7876	0.7876	0.7877	0.7877
40	0.7889	0.7890	0.7891	0.7892	0.7893	0.7893	0.7894	0.7894	0.7895	0.7895
41	0.7907	0.7908	0.7909	0.7910	0.7911	0.7912	0.7912	0.7913	0.7913	0.7914
42	0.7926	0.7927	0.7928	0.7929	0.7930	0.7931	0.7931	0.7932	0.7932	0.7933
43	0.7945	0.7946	0.7947	0.7948	0.7949	0.7950	0.7951	0.7952	0.7952	0.7953
44	0.7964	0.7966	0.7967	0.7968	0.7969	0.7970	0.7971	0.7972	0.7973	0.7973

Age	80	81	82	83	84	85	86	87	88	89
30	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7781	0.7781
34	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795
35	0.7810	0.7810	0.7810	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811
36	0.7826	0.7826	0.7826	0.7826	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827
37	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843
38	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860
39	0.7877	0.7877	0.7877	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878
40	0.7895	0.7895	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896
41	0.7914	0.7914	0.7914	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915
42	0.7933	0.7934	0.7934	0.7934	0.7934	0.7934	0.7934	0.7935	0.7935	0.7935
43	0.7953	0.7954	0.7954	0.7954	0.7954	0.7954	0.7955	0.7955	0.7955	0.7955
44	0.7974	0.7974	0.7974	0.7975	0.7975	0.7975	0.7975	0.7975	0.7975	0.7975

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.7703	0.7713	0.7723	0.7733	0.7743	0.7753	0.7763	0.7773	0.7783	0.7793
46	0.7706	0.7716	0.7726	0.7736	0.7747	0.7757	0.7768	0.7778	0.7788	0.7799
47	0.7709	0.7719	0.7729	0.7740	0.7750	0.7761	0.7772	0.7783	0.7794	0.7805
48	0.7711	0.7722	0.7732	0.7743	0.7754	0.7765	0.7776	0.7788	0.7799	0.7810
49	0.7714	0.7724	0.7735	0.7746	0.7757	0.7769	0.7780	0.7792	0.7804	0.7816
50	0.7716	0.7727	0.7738	0.7749	0.7761	0.7772	0.7784	0.7796	0.7808	0.7821
51	0.7718	0.7729	0.7740	0.7752	0.7764	0.7776	0.7788	0.7800	0.7813	0.7825
52	0.7720	0.7731	0.7743	0.7755	0.7767	0.7779	0.7791	0.7804	0.7817	0.7830
53	0.7722	0.7733	0.7745	0.7757	0.7769	0.7782	0.7795	0.7808	0.7821	0.7834
54	0.7723	0.7735	0.7747	0.7759	0.7772	0.7784	0.7798	0.7811	0.7824	0.7838
55	0.7725	0.7737	0.7749	0.7761	0.7774	0.7787	0.7800	0.7814	0.7828	0.7842
56	0.7727	0.7738	0.7751	0.7763	0.7776	0.7789	0.7803	0.7817	0.7831	0.7845
57	0.7728	0.7740	0.7752	0.7765	0.7778	0.7792	0.7805	0.7820	0.7834	0.7849
58	0.7729	0.7741	0.7754	0.7767	0.7780	0.7794	0.7808	0.7822	0.7837	0.7852
59	0.7730	0.7743	0.7755	0.7768	0.7782	0.7796	0.7810	0.7824	0.7839	0.7855

Age	40	41	42	43	44	45	46	47	48	49
45	0.7803	0.7813	0.7823	0.7832	0.7842	0.7851	0.7860	0.7869	0.7877	0.7885
46	0.7809	0.7820	0.7830	0.7840	0.7850	0.7860	0.7870	0.7879	0.7888	0.7897
47	0.7816	0.7827	0.7837	0.7848	0.7858	0.7869	0.7879	0.7889	0.7899	0.7908
48	0.7822	0.7833	0.7844	0.7855	0.7867	0.7877	0.7888	0.7899	0.7909	0.7919
49	0.7827	0.7839	0.7851	0.7863	0.7874	0.7886	0.7897	0.7908	0.7919	0.7930
50	0.7833	0.7845	0.7857	0.7870	0.7882	0.7894	0.7906	0.7918	0.7929	0.7940
51	0.7838	0.7851	0.7864	0.7876	0.7889	0.7902	0.7914	0.7927	0.7939	0.7951
52	0.7843	0.7856	0.7869	0.7883	0.7896	0.7909	0.7922	0.7935	0.7948	0.7961
53	0.7848	0.7861	0.7875	0.7889	0.7902	0.7916	0.7930	0.7943	0.7957	0.7970
54	0.7852	0.7866	0.7880	0.7894	0.7909	0.7923	0.7937	0.7951	0.7965	0.7979
55	0.7856	0.7871	0.7885	0.7900	0.7915	0.7929	0.7944	0.7959	0.7974	0.7988
56	0.7860	0.7875	0.7890	0.7905	0.7920	0.7936	0.7951	0.7966	0.7981	0.7997
57	0.7864	0.7879	0.7894	0.7910	0.7925	0.7941	0.7957	0.7973	0.7989	0.8005
58	0.7867	0.7882	0.7898	0.7914	0.7930	0.7947	0.7963	0.7979	0.7996	0.8012
59	0.7870	0.7886	0.7902	0.7918	0.7935	0.7952	0.7969	0.7986	0.8003	0.8020

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.7893	0.7901	0.7908	0.7915	0.7921	0.7928	0.7934	0.7939	0.7944	0.7949
46	0.7905	0.7913	0.7921	0.7929	0.7936	0.7943	0.7949	0.7955	0.7961	0.7966
47	0.7917	0.7926	0.7934	0.7942	0.7950	0.7957	0.7964	0.7971	0.7977	0.7983
48	0.7929	0.7938	0.7947	0.7956	0.7964	0.7972	0.7980	0.7987	0.7994	0.8000
49	0.7940	0.7950	0.7960	0.7969	0.7978	0.7987	0.7995	0.8003	0.8010	0.8017
50	0.7951	0.7962	0.7972	0.7982	0.7992	0.8001	0.8010	0.8019	0.8027	0.8034
51	0.7962	0.7974	0.7985	0.7995	0.8006	0.8016	0.8025	0.8034	0.8043	0.8051
52	0.7973	0.7985	0.7997	0.8008	0.8019	0.8030	0.8040	0.8050	0.8059	0.8068
53	0.7983	0.7996	0.8008	0.8021	0.8032	0.8044	0.8055	0.8065	0.8076	0.8085
54	0.7993	0.8006	0.8020	0.8033	0.8045	0.8057	0.8069	0.8080	0.8091	0.8102
55	0.8003	0.8017	0.8031	0.8044	0.8058	0.8071	0.8083	0.8095	0.8107	0.8118
56	0.8012	0.8027	0.8041	0.8056	0.8070	0.8083	0.8097	0.8110	0.8122	0.8134
57	0.8020	0.8036	0.8051	0.8066	0.8081	0.8096	0.8110	0.8124	0.8137	0.8150
58	0.8029	0.8045	0.8061	0.8077	0.8092	0.8108	0.8123	0.8137	0.8152	0.8165
59	0.8037	0.8053	0.8070	0.8087	0.8103	0.8119	0.8135	0.8151	0.8166	0.8180

Age	60	61	62	63	64	65	66	67	68	69
45	0.7954	0.7958	0.7962	0.7966	0.7969	0.7972	0.7975	0.7978	0.7980	0.7982
46	0.7971	0.7976	0.7980	0.7984	0.7988	0.7992	0.7995	0.7998	0.8000	0.8003
47	0.7989	0.7994	0.7999	0.8003	0.8007	0.8011	0.8015	0.8018	0.8021	0.8023
48	0.8006	0.8012	0.8017	0.8022	0.8027	0.8031	0.8035	0.8038	0.8042	0.8044
49	0.8024	0.8030	0.8036	0.8041	0.8046	0.8051	0.8055	0.8059	0.8063	0.8066
50	0.8042	0.8048	0.8055	0.8061	0.8066	0.8071	0.8076	0.8080	0.8084	0.8088
51	0.8059	0.8067	0.8074	0.8080	0.8086	0.8092	0.8097	0.8102	0.8106	0.8110
52	0.8077	0.8085	0.8093	0.8100	0.8106	0.8112	0.8118	0.8123	0.8128	0.8133
53	0.8094	0.8103	0.8111	0.8119	0.8126	0.8133	0.8140	0.8145	0.8151	0.8156
54	0.8112	0.8121	0.8130	0.8139	0.8147	0.8154	0.8161	0.8167	0.8173	0.8179
55	0.8129	0.8139	0.8149	0.8158	0.8167	0.8175	0.8182	0.8189	0.8196	0.8202
56	0.8146	0.8157	0.8167	0.8177	0.8187	0.8196	0.8204	0.8211	0.8219	0.8225
57	0.8162	0.8174	0.8186	0.8196	0.8207	0.8216	0.8225	0.8234	0.8241	0.8249
58	0.8179	0.8191	0.8203	0.8215	0.8226	0.8237	0.8246	0.8256	0.8264	0.8272
59	0.8194	0.8208	0.8221	0.8234	0.8245	0.8257	0.8267	0.8277	0.8287	0.8295

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.7984	0.7986	0.7987	0.7989	0.7990	0.7991	0.7992	0.7993	0.7994	0.7994
46	0.8005	0.8007	0.8008	0.8010	0.8011	0.8012	0.8014	0.8014	0.8015	0.8016
47	0.8026	0.8028	0.8030	0.8031	0.8033	0.8034	0.8036	0.8037	0.8037	0.8038
48	0.8047	0.8049	0.8052	0.8054	0.8055	0.8057	0.8058	0.8059	0.8060	0.8061
49	0.8069	0.8072	0.8074	0.8076	0.8078	0.8080	0.8081	0.8082	0.8084	0.8085
50	0.8091	0.8094	0.8097	0.8099	0.8101	0.8103	0.8105	0.8106	0.8107	0.8109
51	0.8114	0.8117	0.8120	0.8123	0.8125	0.8127	0.8129	0.8131	0.8132	0.8133
52	0.8137	0.8140	0.8144	0.8147	0.8149	0.8152	0.8154	0.8155	0.8157	0.8158
53	0.8160	0.8164	0.8168	0.8171	0.8174	0.8177	0.8179	0.8181	0.8183	0.8184
54	0.8184	0.8188	0.8192	0.8196	0.8199	0.8202	0.8205	0.8207	0.8209	0.8211
55	0.8207	0.8212	0.8217	0.8221	0.8225	0.8228	0.8231	0.8233	0.8235	0.8237
56	0.8231	0.8237	0.8242	0.8246	0.8250	0.8254	0.8257	0.8260	0.8263	0.8265
57	0.8255	0.8261	0.8267	0.8272	0.8276	0.8280	0.8284	0.8287	0.8290	0.8293
58	0.8279	0.8286	0.8292	0.8298	0.8303	0.8307	0.8311	0.8315	0.8318	0.8321
59	0.8303	0.8311	0.8317	0.8324	0.8329	0.8334	0.8339	0.8343	0.8346	0.8350

Age	80	81	82	83	84	85	86	87	88	89
45	0.7995	0.7995	0.7996	0.7996	0.7996	0.7996	0.7996	0.7997	0.7997	0.7997
46	0.8017	0.8017	0.8017	0.8018	0.8018	0.8018	0.8018	0.8019	0.8019	0.8019
47	0.8039	0.8039	0.8040	0.8040	0.8041	0.8041	0.8041	0.8041	0.8041	0.8041
48	0.8062	0.8062	0.8063	0.8063	0.8064	0.8064	0.8064	0.8064	0.8065	0.8065
49	0.8085	0.8086	0.8087	0.8087	0.8087	0.8088	0.8088	0.8088	0.8088	0.8089
50	0.8109	0.8110	0.8111	0.8111	0.8112	0.8112	0.8113	0.8113	0.8113	0.8113
51	0.8134	0.8135	0.8136	0.8136	0.8137	0.8137	0.8138	0.8138	0.8138	0.8138
52	0.8160	0.8161	0.8161	0.8162	0.8163	0.8163	0.8164	0.8164	0.8164	0.8164
53	0.8186	0.8187	0.8188	0.8188	0.8189	0.8190	0.8190	0.8190	0.8191	0.8191
54	0.8212	0.8213	0.8214	0.8215	0.8216	0.8217	0.8217	0.8218	0.8218	0.8218
55	0.8239	0.8241	0.8242	0.8243	0.8244	0.8244	0.8245	0.8245	0.8246	0.8246
56	0.8267	0.8268	0.8270	0.8271	0.8272	0.8273	0.8273	0.8274	0.8274	0.8275
57	0.8295	0.8297	0.8298	0.8300	0.8301	0.8302	0.8302	0.8303	0.8304	0.8304
58	0.8323	0.8325	0.8327	0.8329	0.8330	0.8331	0.8332	0.8333	0.8333	0.8334
59	0.8352	0.8355	0.8357	0.8358	0.8360	0.8361	0.8362	0.8363	0.8364	0.8364

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.7731	0.7744	0.7757	0.7770	0.7783	0.7797	0.7812	0.7827	0.7842	0.7857
61	0.7732	0.7745	0.7758	0.7771	0.7785	0.7799	0.7814	0.7829	0.7844	0.7860
62	0.7733	0.7746	0.7759	0.7772	0.7786	0.7801	0.7815	0.7830	0.7846	0.7862
63	0.7734	0.7747	0.7760	0.7773	0.7787	0.7802	0.7817	0.7832	0.7848	0.7864
64	0.7735	0.7748	0.7761	0.7775	0.7789	0.7803	0.7818	0.7834	0.7849	0.7866
65	0.7736	0.7748	0.7762	0.7775	0.7790	0.7804	0.7819	0.7835	0.7851	0.7868
66	0.7736	0.7749	0.7762	0.7776	0.7791	0.7805	0.7821	0.7836	0.7852	0.7869
67	0.7737	0.7750	0.7763	0.7777	0.7791	0.7806	0.7822	0.7837	0.7854	0.7871
68	0.7737	0.7750	0.7764	0.7778	0.7792	0.7807	0.7823	0.7838	0.7855	0.7872
69	0.7738	0.7751	0.7764	0.7778	0.7793	0.7808	0.7823	0.7839	0.7856	0.7873
70	0.7738	0.7751	0.7765	0.7779	0.7794	0.7809	0.7824	0.7840	0.7857	0.7874
71	0.7739	0.7752	0.7765	0.7779	0.7794	0.7809	0.7825	0.7841	0.7858	0.7875
72	0.7739	0.7752	0.7766	0.7780	0.7795	0.7810	0.7825	0.7842	0.7858	0.7876
73	0.7739	0.7752	0.7766	0.7780	0.7795	0.7810	0.7826	0.7842	0.7859	0.7877
74	0.7739	0.7753	0.7766	0.7781	0.7795	0.7811	0.7826	0.7843	0.7860	0.7877

Age	40	41	42	43	44	45	46	47	48	49
60	0.7873	0.7889	0.7906	0.7922	0.7939	0.7956	0.7974	0.7991	0.8009	0.8026
61	0.7876	0.7892	0.7909	0.7926	0.7943	0.7961	0.7979	0.7997	0.8015	0.8033
62	0.7878	0.7895	0.7912	0.7929	0.7947	0.7965	0.7983	0.8002	0.8020	0.8039
63	0.7880	0.7897	0.7915	0.7932	0.7950	0.7969	0.7987	0.8006	0.8025	0.8044
64	0.7883	0.7900	0.7917	0.7935	0.7954	0.7972	0.7991	0.8010	0.8030	0.8050
65	0.7884	0.7902	0.7920	0.7938	0.7957	0.7975	0.7995	0.8014	0.8034	0.8054
66	0.7886	0.7904	0.7922	0.7940	0.7959	0.7978	0.7998	0.8018	0.8038	0.8059
67	0.7888	0.7906	0.7924	0.7942	0.7962	0.7981	0.8001	0.8021	0.8042	0.8063
68	0.7889	0.7907	0.7926	0.7944	0.7964	0.7984	0.8004	0.8024	0.8045	0.8067
69	0.7891	0.7909	0.7927	0.7946	0.7966	0.7986	0.8006	0.8027	0.8048	0.8070
70	0.7892	0.7910	0.7929	0.7948	0.7968	0.7988	0.8009	0.8030	0.8051	0.8073
71	0.7893	0.7911	0.7930	0.7949	0.7969	0.7990	0.8011	0.8032	0.8054	0.8076
72	0.7894	0.7912	0.7931	0.7951	0.7971	0.7991	0.8012	0.8034	0.8056	0.8078
73	0.7895	0.7913	0.7932	0.7952	0.7972	0.7993	0.8014	0.8036	0.8058	0.8081
74	0.7895	0.7914	0.7933	0.7953	0.7973	0.7994	0.8015	0.8037	0.8060	0.8083

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.8044	0.8062	0.8079	0.8096	0.8113	0.8130	0.8147	0.8163	0.8179	0.8195
61	0.8051	0.8069	0.8087	0.8105	0.8123	0.8141	0.8158	0.8175	0.8192	0.8208
62	0.8058	0.8076	0.8095	0.8114	0.8132	0.8151	0.8169	0.8187	0.8205	0.8222
63	0.8064	0.8083	0.8102	0.8122	0.8141	0.8160	0.8179	0.8198	0.8216	0.8235
64	0.8069	0.8089	0.8109	0.8129	0.8149	0.8169	0.8189	0.8208	0.8228	0.8247
65	0.8075	0.8095	0.8116	0.8136	0.8157	0.8177	0.8198	0.8218	0.8238	0.8258
66	0.8080	0.8100	0.8122	0.8143	0.8164	0.8185	0.8206	0.8228	0.8248	0.8269
67	0.8084	0.8105	0.8127	0.8149	0.8171	0.8192	0.8214	0.8236	0.8258	0.8279
68	0.8088	0.8110	0.8132	0.8154	0.8177	0.8199	0.8222	0.8244	0.8267	0.8289
69	0.8092	0.8114	0.8137	0.8159	0.8182	0.8205	0.8229	0.8252	0.8275	0.8298
70	0.8095	0.8118	0.8141	0.8164	0.8188	0.8211	0.8235	0.8259	0.8283	0.8306
71	0.8098	0.8121	0.8145	0.8168	0.8192	0.8216	0.8241	0.8265	0.8290	0.8314
72	0.8101	0.8125	0.8148	0.8172	0.8197	0.8221	0.8246	0.8271	0.8296	0.8321
73	0.8104	0.8127	0.8151	0.8176	0.8201	0.8226	0.8251	0.8276	0.8302	0.8328
74	0.8106	0.8130	0.8154	0.8179	0.8204	0.8229	0.8255	0.8281	0.8307	0.8334

Age	60	61	62	63	64	65	66	67	68	69
60	0.8210	0.8224	0.8238	0.8252	0.8264	0.8276	0.8288	0.8299	0.8309	0.8318
61	0.8224	0.8240	0.8255	0.8269	0.8283	0.8296	0.8308	0.8320	0.8331	0.8341
62	0.8239	0.8255	0.8271	0.8286	0.8301	0.8315	0.8328	0.8341	0.8353	0.8364
63	0.8252	0.8270	0.8286	0.8303	0.8318	0.8333	0.8348	0.8361	0.8374	0.8386
64	0.8265	0.8284	0.8301	0.8319	0.8335	0.8351	0.8366	0.8381	0.8395	0.8408
65	0.8278	0.8297	0.8316	0.8334	0.8351	0.8368	0.8385	0.8400	0.8415	0.8429
66	0.8290	0.8310	0.8329	0.8348	0.8367	0.8385	0.8402	0.8419	0.8435	0.8450
67	0.8301	0.8322	0.8342	0.8362	0.8382	0.8401	0.8419	0.8437	0.8454	0.8470
68	0.8311	0.8333	0.8354	0.8376	0.8396	0.8416	0.8435	0.8454	0.8472	0.8489
69	0.8321	0.8344	0.8366	0.8388	0.8409	0.8430	0.8451	0.8471	0.8489	0.8508
70	0.8330	0.8354	0.8377	0.8400	0.8422	0.8444	0.8465	0.8486	0.8506	0.8525
71	0.8339	0.8363	0.8387	0.8411	0.8434	0.8457	0.8479	0.8501	0.8522	0.8542
72	0.8346	0.8371	0.8396	0.8421	0.8445	0.8469	0.8492	0.8515	0.8537	0.8558
73	0.8354	0.8379	0.8405	0.8430	0.8455	0.8480	0.8504	0.8528	0.8551	0.8573
74	0.8360	0.8387	0.8413	0.8439	0.8465	0.8491	0.8516	0.8540	0.8564	0.8588

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		70	71	72	73	74	75	76	77	78	79
	60	0.8327	0.8335	0.8343	0.8350	0.8356	0.8361	0.8366	0.8371	0.8375	0.8378
	61	0.8351	0.8360	0.8368	0.8375	0.8382	0.8389	0.8394	0.8399	0.8404	0.8408
	62	0.8374	0.8384	0.8393	0.8401	0.8409	0.8416	0.8422	0.8428	0.8433	0.8437
	63	0.8397	0.8408	0.8418	0.8427	0.8435	0.8443	0.8450	0.8456	0.8462	0.8467
	64	0.8420	0.8432	0.8442	0.8452	0.8461	0.8470	0.8477	0.8484	0.8490	0.8496
	65	0.8442	0.8455	0.8466	0.8477	0.8487	0.8496	0.8505	0.8512	0.8519	0.8525
	66	0.8464	0.8477	0.8490	0.8502	0.8513	0.8523	0.8532	0.8540	0.8548	0.8555
	67	0.8485	0.8499	0.8513	0.8526	0.8538	0.8549	0.8559	0.8568	0.8576	0.8584
	68	0.8505	0.8521	0.8535	0.8549	0.8562	0.8574	0.8585	0.8595	0.8604	0.8612
	69	0.8525	0.8542	0.8557	0.8572	0.8586	0.8599	0.8610	0.8621	0.8631	0.8641
	70	0.8544	0.8561	0.8578	0.8594	0.8609	0.8623	0.8635	0.8647	0.8658	0.8668
	71	0.8562	0.8580	0.8598	0.8615	0.8631	0.8646	0.8660	0.8673	0.8685	0.8695
	72	0.8579	0.8599	0.8617	0.8635	0.8652	0.8668	0.8683	0.8697	0.8710	0.8722
	73	0.8595	0.8616	0.8636	0.8655	0.8673	0.8690	0.8706	0.8721	0.8735	0.8748
	74	0.8610	0.8632	0.8653	0.8673	0.8692	0.8710	0.8728	0.8744	0.8759	0.8772

Age		80	81	82	83	84	85	86	87	88	89
	60	0.8382	0.8384	0.8387	0.8389	0.8390	0.8392	0.8393	0.8394	0.8395	0.8395
	61	0.8411	0.8414	0.8417	0.8419	0.8421	0.8423	0.8424	0.8425	0.8426	0.8427
	62	0.8441	0.8444	0.8447	0.8450	0.8452	0.8454	0.8456	0.8457	0.8458	0.8459
	63	0.8471	0.8475	0.8478	0.8481	0.8484	0.8486	0.8488	0.8489	0.8490	0.8491
	64	0.8501	0.8505	0.8509	0.8512	0.8515	0.8518	0.8520	0.8522	0.8523	0.8524
	65	0.8531	0.8536	0.8540	0.8544	0.8547	0.8550	0.8552	0.8554	0.8556	0.8557
	66	0.8561	0.8566	0.8571	0.8575	0.8579	0.8582	0.8585	0.8587	0.8589	0.8591
	67	0.8591	0.8597	0.8602	0.8607	0.8611	0.8614	0.8618	0.8620	0.8623	0.8624
	68	0.8620	0.8627	0.8633	0.8638	0.8643	0.8647	0.8650	0.8653	0.8656	0.8658
	69	0.8649	0.8656	0.8663	0.8669	0.8674	0.8679	0.8683	0.8686	0.8689	0.8692
	70	0.8677	0.8686	0.8693	0.8700	0.8706	0.8711	0.8715	0.8719	0.8723	0.8726
	71	0.8705	0.8714	0.8723	0.8730	0.8737	0.8742	0.8747	0.8752	0.8756	0.8759
	72	0.8733	0.8743	0.8752	0.8760	0.8767	0.8773	0.8779	0.8784	0.8789	0.8792
	73	0.8759	0.8770	0.8780	0.8789	0.8797	0.8804	0.8810	0.8816	0.8821	0.8825
	74	0.8785	0.8797	0.8808	0.8817	0.8826	0.8834	0.8841	0.8847	0.8853	0.8858

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7843	0.7860	0.7878
76	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7844	0.7861	0.7878
77	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
78	0.7740	0.7753	0.7767	0.7782	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
79	0.7740	0.7754	0.7767	0.7782	0.7797	0.7812	0.7828	0.7845	0.7862	0.7879
80	0.7740	0.7754	0.7768	0.7782	0.7797	0.7812	0.7828	0.7845	0.7862	0.7880
81	0.7740	0.7754	0.7768	0.7782	0.7797	0.7812	0.7828	0.7845	0.7862	0.7880
82	0.7740	0.7754	0.7768	0.7782	0.7797	0.7812	0.7829	0.7845	0.7862	0.7880
83	0.7740	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7862	0.7880
84	0.7740	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7880
85	0.7741	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7880
86	0.7741	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7880
87	0.7741	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7881
88	0.7740	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7881
89	0.7740	0.7754	0.7768	0.7782	0.7797	0.7813	0.7829	0.7845	0.7863	0.7881

Age	40	41	42	43	44	45	46	47	48	49
75	0.7896	0.7915	0.7934	0.7954	0.7974	0.7995	0.8017	0.8039	0.8061	0.8084
76	0.7896	0.7915	0.7935	0.7955	0.7975	0.7996	0.8018	0.8040	0.8063	0.8086
77	0.7897	0.7916	0.7935	0.7955	0.7976	0.7997	0.8019	0.8041	0.8064	0.8087
78	0.7897	0.7916	0.7936	0.7956	0.7976	0.7998	0.8020	0.8042	0.8065	0.8089
79	0.7898	0.7917	0.7936	0.7956	0.7977	0.7998	0.8020	0.8043	0.8066	0.8090
80	0.7898	0.7917	0.7937	0.7957	0.7978	0.7999	0.8021	0.8044	0.8067	0.8091
81	0.7898	0.7917	0.7937	0.7957	0.7978	0.7999	0.8022	0.8044	0.8068	0.8092
82	0.7899	0.7918	0.7937	0.7957	0.7978	0.8000	0.8022	0.8045	0.8068	0.8092
83	0.7899	0.7918	0.7937	0.7958	0.7979	0.8000	0.8022	0.8045	0.8069	0.8093
84	0.7899	0.7918	0.7938	0.7958	0.7979	0.8000	0.8023	0.8046	0.8069	0.8093
85	0.7899	0.7918	0.7938	0.7958	0.7979	0.8001	0.8023	0.8046	0.8069	0.8094
86	0.7899	0.7918	0.7938	0.7958	0.7979	0.8001	0.8023	0.8046	0.8070	0.8094
87	0.7899	0.7918	0.7938	0.7958	0.7979	0.8001	0.8023	0.8046	0.8070	0.8094
88	0.7899	0.7918	0.7938	0.7958	0.7979	0.8001	0.8023	0.8046	0.8070	0.8094
89	0.7899	0.7918	0.7938	0.7958	0.7979	0.8001	0.8023	0.8046	0.8070	0.8094

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		50	51	52	53	54	55	56	57	58	59
	75	0.8108	0.8132	0.8157	0.8182	0.8207	0.8233	0.8259	0.8286	0.8312	0.8339
	76	0.8110	0.8134	0.8159	0.8184	0.8210	0.8236	0.8263	0.8290	0.8317	0.8344
	77	0.8111	0.8136	0.8161	0.8187	0.8213	0.8239	0.8266	0.8293	0.8321	0.8348
	78	0.8113	0.8138	0.8163	0.8189	0.8215	0.8241	0.8269	0.8296	0.8324	0.8352
	79	0.8114	0.8139	0.8164	0.8190	0.8217	0.8244	0.8271	0.8299	0.8327	0.8356
	80	0.8115	0.8140	0.8166	0.8192	0.8218	0.8246	0.8273	0.8301	0.8330	0.8359
	81	0.8116	0.8141	0.8167	0.8193	0.8220	0.8247	0.8275	0.8304	0.8333	0.8362
	82	0.8117	0.8142	0.8168	0.8194	0.8221	0.8249	0.8277	0.8306	0.8335	0.8364
	83	0.8117	0.8143	0.8169	0.8195	0.8222	0.8250	0.8278	0.8307	0.8337	0.8366
	84	0.8118	0.8143	0.8169	0.8196	0.8223	0.8251	0.8280	0.8309	0.8338	0.8368
	85	0.8118	0.8144	0.8170	0.8197	0.8224	0.8252	0.8281	0.8310	0.8340	0.8370
	86	0.8119	0.8144	0.8170	0.8197	0.8225	0.8253	0.8281	0.8311	0.8341	0.8371
	87	0.8119	0.8145	0.8171	0.8198	0.8225	0.8253	0.8282	0.8312	0.8342	0.8372
	88	0.8119	0.8145	0.8171	0.8198	0.8226	0.8254	0.8283	0.8312	0.8342	0.8373
	89	0.8119	0.8145	0.8171	0.8198	0.8226	0.8254	0.8283	0.8313	0.8343	0.8374

Age		60	61	62	63	64	65	66	67	68	69
	75	0.8366	0.8393	0.8420	0.8447	0.8474	0.8500	0.8526	0.8552	0.8577	0.8601
	76	0.8372	0.8399	0.8427	0.8454	0.8482	0.8509	0.8536	0.8562	0.8588	0.8614
	77	0.8377	0.8405	0.8433	0.8461	0.8489	0.8517	0.8545	0.8572	0.8599	0.8625
	78	0.8381	0.8410	0.8438	0.8467	0.8496	0.8525	0.8553	0.8581	0.8609	0.8636
	79	0.8385	0.8414	0.8443	0.8473	0.8502	0.8532	0.8561	0.8589	0.8618	0.8646
	80	0.8388	0.8418	0.8448	0.8478	0.8508	0.8538	0.8567	0.8597	0.8626	0.8655
	81	0.8392	0.8422	0.8452	0.8482	0.8513	0.8543	0.8574	0.8604	0.8634	0.8663
	82	0.8394	0.8425	0.8455	0.8486	0.8517	0.8548	0.8579	0.8610	0.8641	0.8671
	83	0.8397	0.8427	0.8458	0.8490	0.8521	0.8553	0.8584	0.8616	0.8647	0.8678
	84	0.8399	0.8430	0.8461	0.8493	0.8525	0.8557	0.8589	0.8621	0.8652	0.8684
	85	0.8401	0.8432	0.8464	0.8495	0.8528	0.8560	0.8593	0.8625	0.8657	0.8689
	86	0.8402	0.8434	0.8466	0.8498	0.8530	0.8563	0.8596	0.8629	0.8662	0.8694
	87	0.8403	0.8435	0.8467	0.8500	0.8533	0.8566	0.8599	0.8632	0.8665	0.8699
	88	0.8404	0.8436	0.8469	0.8501	0.8535	0.8568	0.8601	0.8635	0.8669	0.8702
	89	0.8405	0.8437	0.8470	0.8503	0.8536	0.8570	0.8604	0.8638	0.8672	0.8706

Table 3b - NDPERS (Main, National Guard and Law Enforcement) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.8625	0.8648	0.8670	0.8691	0.8711	0.8730	0.8748	0.8765	0.8781	0.8796
76	0.8638	0.8662	0.8685	0.8707	0.8729	0.8749	0.8768	0.8786	0.8803	0.8819
77	0.8651	0.8676	0.8700	0.8723	0.8745	0.8766	0.8787	0.8806	0.8824	0.8841
78	0.8662	0.8688	0.8713	0.8737	0.8761	0.8783	0.8804	0.8825	0.8844	0.8862
79	0.8673	0.8700	0.8726	0.8751	0.8775	0.8799	0.8821	0.8842	0.8863	0.8882
80	0.8683	0.8711	0.8737	0.8764	0.8789	0.8813	0.8837	0.8859	0.8880	0.8900
81	0.8692	0.8720	0.8748	0.8775	0.8802	0.8827	0.8851	0.8875	0.8897	0.8918
82	0.8700	0.8730	0.8758	0.8786	0.8813	0.8840	0.8865	0.8889	0.8912	0.8934
83	0.8708	0.8738	0.8767	0.8796	0.8824	0.8851	0.8877	0.8903	0.8927	0.8950
84	0.8715	0.8745	0.8776	0.8805	0.8834	0.8862	0.8889	0.8915	0.8940	0.8964
85	0.8721	0.8752	0.8783	0.8813	0.8843	0.8872	0.8900	0.8927	0.8953	0.8978
86	0.8726	0.8758	0.8790	0.8821	0.8851	0.8881	0.8910	0.8938	0.8965	0.8990
87	0.8731	0.8764	0.8796	0.8828	0.8859	0.8889	0.8919	0.8948	0.8975	0.9002
88	0.8736	0.8769	0.8801	0.8834	0.8865	0.8897	0.8927	0.8956	0.8985	0.9013
89	0.8739	0.8773	0.8806	0.8839	0.8871	0.8903	0.8934	0.8965	0.8994	0.9022

Age	80	81	82	83	84	85	86	87	88	89
75	0.8810	0.8823	0.8834	0.8845	0.8855	0.8863	0.8871	0.8878	0.8884	0.8890
76	0.8834	0.8848	0.8860	0.8872	0.8882	0.8892	0.8900	0.8908	0.8915	0.8921
77	0.8857	0.8872	0.8885	0.8898	0.8909	0.8919	0.8929	0.8937	0.8945	0.8952
78	0.8879	0.8894	0.8909	0.8922	0.8935	0.8946	0.8956	0.8966	0.8974	0.8982
79	0.8899	0.8916	0.8932	0.8946	0.8959	0.8972	0.8983	0.8993	0.9002	0.9011
80	0.8919	0.8937	0.8953	0.8969	0.8983	0.8996	0.9008	0.9020	0.9030	0.9039
81	0.8938	0.8957	0.8974	0.8990	0.9006	0.9020	0.9033	0.9045	0.9056	0.9066
82	0.8955	0.8975	0.8994	0.9011	0.9027	0.9042	0.9056	0.9069	0.9081	0.9092
83	0.8972	0.8993	0.9012	0.9031	0.9048	0.9064	0.9079	0.9093	0.9105	0.9117
84	0.8987	0.9009	0.9030	0.9049	0.9067	0.9084	0.9100	0.9115	0.9129	0.9141
85	0.9002	0.9024	0.9046	0.9066	0.9085	0.9103	0.9120	0.9136	0.9151	0.9164
86	0.9015	0.9039	0.9061	0.9083	0.9103	0.9122	0.9139	0.9156	0.9172	0.9186
87	0.9028	0.9052	0.9075	0.9098	0.9119	0.9139	0.9158	0.9175	0.9192	0.9207
88	0.9039	0.9064	0.9089	0.9112	0.9134	0.9155	0.9174	0.9193	0.9211	0.9227
89	0.9050	0.9076	0.9101	0.9125	0.9148	0.9170	0.9190	0.9210	0.9228	0.9246

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	100% Joint and Survivor Annuity with Pop-Up

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.8825	0.8826	0.8827	0.8829	0.8830	0.8831	0.8832	0.8833	0.8834	0.8835
31	0.8829	0.8831	0.8832	0.8833	0.8834	0.8836	0.8837	0.8838	0.8839	0.8840
32	0.8834	0.8835	0.8837	0.8838	0.8839	0.8841	0.8842	0.8843	0.8844	0.8845
33	0.8838	0.8840	0.8841	0.8843	0.8844	0.8846	0.8847	0.8848	0.8850	0.8851
34	0.8843	0.8845	0.8846	0.8848	0.8849	0.8851	0.8852	0.8854	0.8855	0.8856
35	0.8848	0.8850	0.8851	0.8853	0.8854	0.8856	0.8858	0.8859	0.8861	0.8862
36	0.8853	0.8855	0.8856	0.8858	0.8860	0.8861	0.8863	0.8865	0.8866	0.8868
37	0.8858	0.8860	0.8862	0.8863	0.8865	0.8867	0.8869	0.8870	0.8872	0.8874
38	0.8863	0.8865	0.8867	0.8869	0.8871	0.8873	0.8874	0.8876	0.8878	0.8880
39	0.8868	0.8870	0.8872	0.8874	0.8876	0.8878	0.8880	0.8882	0.8884	0.8886
40	0.8873	0.8876	0.8878	0.8880	0.8882	0.8884	0.8886	0.8888	0.8890	0.8892
41	0.8879	0.8881	0.8883	0.8885	0.8888	0.8890	0.8892	0.8894	0.8897	0.8899
42	0.8884	0.8887	0.8889	0.8891	0.8894	0.8896	0.8898	0.8901	0.8903	0.8905
43	0.8890	0.8892	0.8895	0.8897	0.8899	0.8902	0.8904	0.8907	0.8909	0.8912
44	0.8895	0.8898	0.8900	0.8903	0.8905	0.8908	0.8911	0.8913	0.8916	0.8918

Age	40	41	42	43	44	45	46	47	48	49
30	0.8836	0.8837	0.8838	0.8839	0.8839	0.8840	0.8841	0.8841	0.8842	0.8843
31	0.8841	0.8842	0.8843	0.8844	0.8845	0.8846	0.8846	0.8847	0.8848	0.8849
32	0.8847	0.8848	0.8849	0.8850	0.8851	0.8851	0.8852	0.8853	0.8854	0.8855
33	0.8852	0.8853	0.8854	0.8855	0.8856	0.8857	0.8858	0.8859	0.8860	0.8861
34	0.8858	0.8859	0.8860	0.8861	0.8862	0.8864	0.8865	0.8866	0.8866	0.8867
35	0.8863	0.8865	0.8866	0.8867	0.8869	0.8870	0.8871	0.8872	0.8873	0.8874
36	0.8869	0.8871	0.8872	0.8874	0.8875	0.8876	0.8878	0.8879	0.8880	0.8881
37	0.8875	0.8877	0.8879	0.8880	0.8882	0.8883	0.8884	0.8885	0.8887	0.8888
38	0.8882	0.8883	0.8885	0.8887	0.8888	0.8890	0.8891	0.8892	0.8894	0.8895
39	0.8888	0.8890	0.8892	0.8893	0.8895	0.8897	0.8898	0.8900	0.8901	0.8902
40	0.8894	0.8896	0.8898	0.8900	0.8902	0.8904	0.8905	0.8907	0.8908	0.8910
41	0.8901	0.8903	0.8905	0.8907	0.8909	0.8911	0.8913	0.8914	0.8916	0.8918
42	0.8907	0.8910	0.8912	0.8914	0.8916	0.8918	0.8920	0.8922	0.8924	0.8926
43	0.8914	0.8916	0.8919	0.8921	0.8923	0.8925	0.8928	0.8930	0.8932	0.8934
44	0.8921	0.8923	0.8926	0.8928	0.8931	0.8933	0.8935	0.8937	0.8940	0.8942

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.8843	0.8844	0.8844	0.8845	0.8845	0.8846	0.8846	0.8846	0.8847	0.8847
31	0.8849	0.8850	0.8850	0.8851	0.8851	0.8852	0.8852	0.8853	0.8853	0.8853
32	0.8855	0.8856	0.8857	0.8857	0.8858	0.8858	0.8859	0.8859	0.8859	0.8860
33	0.8862	0.8862	0.8863	0.8864	0.8864	0.8865	0.8865	0.8866	0.8866	0.8866
34	0.8868	0.8869	0.8870	0.8870	0.8871	0.8872	0.8872	0.8873	0.8873	0.8874
35	0.8875	0.8876	0.8877	0.8877	0.8878	0.8879	0.8879	0.8880	0.8880	0.8881
36	0.8882	0.8883	0.8884	0.8884	0.8885	0.8886	0.8887	0.8887	0.8888	0.8888
37	0.8889	0.8890	0.8891	0.8892	0.8893	0.8893	0.8894	0.8895	0.8896	0.8896
38	0.8896	0.8897	0.8898	0.8899	0.8900	0.8901	0.8902	0.8903	0.8904	0.8904
39	0.8904	0.8905	0.8906	0.8907	0.8908	0.8909	0.8910	0.8911	0.8912	0.8912
40	0.8911	0.8913	0.8914	0.8915	0.8916	0.8917	0.8918	0.8919	0.8920	0.8921
41	0.8919	0.8921	0.8922	0.8923	0.8925	0.8926	0.8927	0.8928	0.8929	0.8930
42	0.8927	0.8929	0.8930	0.8932	0.8933	0.8934	0.8936	0.8937	0.8938	0.8939
43	0.8935	0.8937	0.8939	0.8940	0.8942	0.8943	0.8945	0.8946	0.8947	0.8948
44	0.8944	0.8946	0.8947	0.8949	0.8951	0.8952	0.8954	0.8955	0.8956	0.8958

Age	60	61	62	63	64	65	66	67	68	69
30	0.8847	0.8847	0.8848	0.8848	0.8848	0.8848	0.8848	0.8848	0.8849	0.8849
31	0.8853	0.8854	0.8854	0.8854	0.8854	0.8855	0.8855	0.8855	0.8855	0.8855
32	0.8860	0.8860	0.8861	0.8861	0.8861	0.8861	0.8861	0.8862	0.8862	0.8862
33	0.8867	0.8867	0.8867	0.8868	0.8868	0.8868	0.8868	0.8869	0.8869	0.8869
34	0.8874	0.8874	0.8875	0.8875	0.8875	0.8875	0.8876	0.8876	0.8876	0.8876
35	0.8881	0.8882	0.8882	0.8882	0.8883	0.8883	0.8883	0.8883	0.8884	0.8884
36	0.8889	0.8889	0.8890	0.8890	0.8890	0.8891	0.8891	0.8891	0.8891	0.8892
37	0.8897	0.8897	0.8898	0.8898	0.8898	0.8899	0.8899	0.8899	0.8899	0.8900
38	0.8905	0.8905	0.8906	0.8906	0.8907	0.8907	0.8907	0.8908	0.8908	0.8908
39	0.8913	0.8914	0.8914	0.8915	0.8915	0.8916	0.8916	0.8916	0.8917	0.8917
40	0.8922	0.8922	0.8923	0.8924	0.8924	0.8924	0.8925	0.8925	0.8926	0.8926
41	0.8931	0.8931	0.8932	0.8933	0.8933	0.8934	0.8934	0.8935	0.8935	0.8935
42	0.8940	0.8940	0.8941	0.8942	0.8943	0.8943	0.8944	0.8944	0.8944	0.8945
43	0.8949	0.8950	0.8951	0.8952	0.8952	0.8953	0.8953	0.8954	0.8954	0.8955
44	0.8959	0.8960	0.8961	0.8961	0.8962	0.8963	0.8963	0.8964	0.8965	0.8965

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member		Beneficiary									
Age		70	71	72	73	74	75	76	77	78	79
	30	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
	31	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8856	0.8856	0.8856	0.8856
	32	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
	33	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
	34	0.8876	0.8876	0.8876	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877
	35	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
	36	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
	37	0.8900	0.8900	0.8900	0.8900	0.8900	0.8900	0.8901	0.8901	0.8901	0.8901
	38	0.8908	0.8908	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909
	39	0.8917	0.8917	0.8917	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918
	40	0.8926	0.8926	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927
	41	0.8935	0.8936	0.8936	0.8936	0.8936	0.8936	0.8936	0.8937	0.8937	0.8937
	42	0.8945	0.8945	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8946	0.8947
	43	0.8955	0.8955	0.8956	0.8956	0.8956	0.8956	0.8956	0.8957	0.8957	0.8957
	44	0.8965	0.8966	0.8966	0.8966	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967

Age		80	81	82	83	84	85	86	87	88	89
	30	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
	31	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856
	32	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
	33	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
	34	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877
	35	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
	36	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
	37	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901
	38	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909
	39	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918
	40	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927
	41	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937
	42	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947
	43	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957
	44	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.8901	0.8904	0.8906	0.8909	0.8912	0.8914	0.8917	0.8920	0.8922	0.8925
46	0.8907	0.8910	0.8912	0.8915	0.8918	0.8920	0.8923	0.8926	0.8929	0.8932
47	0.8913	0.8916	0.8918	0.8921	0.8924	0.8927	0.8930	0.8933	0.8936	0.8939
48	0.8919	0.8921	0.8924	0.8927	0.8930	0.8933	0.8936	0.8939	0.8942	0.8945
49	0.8925	0.8928	0.8930	0.8933	0.8937	0.8940	0.8943	0.8946	0.8949	0.8952
50	0.8931	0.8934	0.8937	0.8940	0.8943	0.8946	0.8949	0.8953	0.8956	0.8959
51	0.8937	0.8940	0.8943	0.8946	0.8949	0.8953	0.8956	0.8959	0.8963	0.8966
52	0.8943	0.8946	0.8949	0.8952	0.8956	0.8959	0.8963	0.8966	0.8970	0.8973
53	0.8949	0.8952	0.8955	0.8959	0.8962	0.8966	0.8969	0.8973	0.8977	0.8981
54	0.8955	0.8958	0.8962	0.8965	0.8969	0.8972	0.8976	0.8980	0.8984	0.8988
55	0.8961	0.8965	0.8968	0.8972	0.8975	0.8979	0.8983	0.8987	0.8991	0.8995
56	0.8968	0.8971	0.8974	0.8978	0.8982	0.8986	0.8989	0.8993	0.8998	0.9002
57	0.8974	0.8977	0.8981	0.8984	0.8988	0.8992	0.8996	0.9000	0.9004	0.9009
58	0.8980	0.8983	0.8987	0.8991	0.8995	0.8999	0.9003	0.9007	0.9011	0.9016
59	0.8986	0.8989	0.8993	0.8997	0.9001	0.9005	0.9009	0.9014	0.9018	0.9023

Age	40	41	42	43	44	45	46	47	48	49
45	0.8928	0.8930	0.8933	0.8936	0.8938	0.8941	0.8943	0.8945	0.8948	0.8950
46	0.8935	0.8937	0.8940	0.8943	0.8946	0.8948	0.8951	0.8953	0.8956	0.8958
47	0.8942	0.8945	0.8947	0.8950	0.8953	0.8956	0.8959	0.8962	0.8964	0.8967
48	0.8949	0.8952	0.8955	0.8958	0.8961	0.8964	0 8967	0.8970	0.8973	0.8975
49	0.8956	0.8959	0.8962	0.8965	0.8969	0.8972	0.8975	0.8978	0.8981	0.8984
50	0.8963	0.8966	0.8970	0.8973	0.8976	0.8980	0.8983	0.8986	0.8990	0.8993
51	0.8970	0.8974	0.8977	0.8981	0.8984	0.8988	0.8991	0.8995	0.8998	0.9001
52	0.8977	0.8981	0.8985	0.8988	0.8992	0.8996	0.8999	0.9003	0.9007	0.9010
53	0.8984	0.8988	0.8992	0.8996	0.9000	0.9004	0.9008	0.9012	0.9015	0.9019
54	0.8992	0.8996	0.9000	0.9004	0.9008	0.9012	0.9016	0.9020	0.9024	0.9028
55	0.8999	0.9003	0.9007	0.9011	0.9016	0.9020	0.9024	0.9028	0.9033	0.9037
56	0.9006	0.9010	0.9015	0.9019	0.9023	0.9028	0.9032	0.9037	0.9041	0.9046
57	0.9013	0.9018	0.9022	0.9027	0.9031	0.9036	0.9041	0.9045	0.9050	0.9055
58	0.9020	0.9025	0.9029	0.9034	0.9039	0.9044	0.9049	0.9054	0.9058	0.9063
59	0.9027	0.9032	0.9037	0.9042	0.9047	0.9052	0.9057	0.9062	0.9067	0.9072

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.8952	0.8954	0.8956	0.8958	0.8960	0.8961	0.8963	0.8965	0.8966	0.8967
46	0.8961	0.8963	0.8965	0.8967	0.8969	0.8971	0.8973	0.8974	0.8976	0.8977
47	0.8969	0.8972	0.8974	0.8976	0.8978	0.8980	0.8982	0.8984	0.8986	0.8987
48	0.8978	0.8981	0.8983	0.8986	0.8988	0.8990	0.8992	0.8994	0.8996	0.8998
49	0.8987	0.8990	0.8992	0.8995	0.8997	0.9000	0.9002	0.9004	0.9006	0.9008
50	0.8996	0.8999	0.9002	0.9004	0.9007	0.9010	0.9012	0.9014	0.9017	0.9019
51	0.9005	0.9008	0.9011	0.9014	0.9017	0.9020	0.9022	0.9025	0.9027	0.9030
52	0.9014	0.9017	0.9020	0.9024	0.9027	0.9030	0.9033	0.9035	0.9038	0.9041
53	0.9023	0.9026	0.9030	0.9033	0.9037	0.9040	0.9043	0.9046	0.9049	0.9052
54	0.9032	0.9036	0.9040	0.9043	0.9047	0.9050	0.9054	0.9057	0.9060	0.9063
55	0.9041	0.9045	0.9049	0.9053	0.9057	0.9061	0.9064	0.9068	0.9071	0.9074
56	0.9050	0.9054	0.9059	0.9063	0.9067	0.9071	0.9075	0.9078	0.9082	0.9085
57	0.9059	0.9064	0.9068	0.9073	0.9077	0.9081	0.9085	0.9089	0.9093	0.9097
58	0.9068	0.9073	0.9078	0.9082	0.9087	0.9091	0.9096	0.9100	0.9104	0.9108
59	0.9077	0.9082	0.9087	0.9092	0.9097	0.9102	0.9106	0.9111	0.9115	0.9120

Age	60	61	62	63	64	65	66	67	68	69
45	0.8968	0.8970	0.8971	0.8972	0.8972	0.8973	0.8974	0.8974	0.8975	0.8976
46	0.8978	0.8980	0.8981	0.8982	0.8983	0.8984	0.8984	0.8985	0.8986	0.8986
47	0.8989	0.8990	0.8991	0.8993	0.8994	0.8995	0.8995	0.8996	0.8997	0.8998
48	0.8999	0.9001	0.9002	0.9003	0.9005	0.9006	0.9007	0.9007	0.9008	0.9009
49	0.9010	0.9012	0.9013	0.9014	0.9016	0.9017	0.9018	0.9019	0.9020	0.9021
50	0.9021	0.9023	0.9024	0.9026	0.9027	0.9029	0.9030	0.9031	0.9032	0.9033
51	0.9032	0.9034	0.9036	0.9037	0.9039	0.9040	0.9042	0.9043	0.9044	0.9045
52	0.9043	0.9045	0.9047	0.9049	0.9051	0.9052	0.9054	0.9055	0.9056	0.9057
53	0.9054	0.9057	0.9059	0.9061	0.9063	0.9065	0.9066	0.9068	0.9069	0.9070
54	0.9066	0.9068	0.9071	0.9073	0.9075	0.9077	0.9079	0.9080	0.9082	0.9083
55	0.9077	0.9080	0.9083	0.9085	0.9087	0.9090	0.9092	0.9093	0.9095	0.9097
56	0.9089	0.9092	0.9095	0.9097	0.9100	0.9102	0.9105	0.9107	0.9108	0.9110
57	0.9100	0.9104	0.9107	0.9110	0.9113	0.9115	0.9118	0.9120	0.9122	0.9124
58	0.9112	0.9116	0.9119	0.9122	0.9125	0.9128	0.9131	0.9133	0.9136	0.9138
59	0.9124	0.9128	0.9131	0.9135	0.9138	0.9141	0.9144	0.9147	0.9149	0.9152

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.8976	0.8976	0.8977	0.8977	0.8977	0.8977	0.8978	0.8978	0.8978	0.8978
46	0.8987	0.8987	0.8988	0.8988	0.8988	0.8988	0.8989	0.8989	0.8989	0.8989
47	0.8998	0.8999	0.8999	0.8999	0.9000	0.9000	0.9000	0.9000	0.9000	0.9001
48	0.9010	0.9010	0.9011	0.9011	0.9011	0.9012	0.9012	0.9012	0.9012	0.9012
49	0.9021	0.9022	0.9022	0.9023	0.9023	0.9024	0.9024	0.9024	0.9024	0.9025
50	0.9033	0.9034	0.9035	0.9035	0.9036	0.9036	0.9036	0.9037	0.9037	0.9037
51	0.9046	0.9047	0.9047	0.9048	0.9048	0.9049	0.9049	0.9049	0.9050	0.9050
52	0.9058	0.9059	0.9060	0.9061	0.9061	0.9062	0.9062	0.9063	0.9063	0.9063
53	0.9071	0.9072	0.9073	0.9074	0.9075	0.9075	0.9076	0.9076	0.9076	0.9077
54	0.9085	0.9086	0.9087	0.9087	0.9088	0.9089	0.9089	0.9090	0.9090	0.9091
55	0.9098	0.9099	0.9100	0.9101	0.9102	0.9103	0.9103	0.9104	0.9104	0.9105
56	0.9112	0.9113	0.9114	0.9115	0.9116	0.9117	0.9118	0.9118	0.9119	0.9119
57	0.9126	0.9127	0.9128	0.9130	0.9131	0.9132	0.9132	0.9133	0.9134	0.9134
58	0.9140	0.9141	0.9143	0.9144	0.9145	0.9146	0.9147	0.9148	0.9149	0.9149
59	0.9154	0.9156	0.9157	0.9159	0.9160	0.9161	0.9162	0.9163	0.9164	0.9165

Age	80	81	82	83	84	85	86	87	88	89
45	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978
46	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989
47	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001
48	0.9012	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013
49	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025
50	0.9037	0.9037	0.9037	0.9037	0.9038	0.9038	0.9038	0.9038	0.9038	0.9038
51	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050	0.9050
52	0.9063	0.9063	0.9064	0.9064	0.9064	0.9064	0.9064	0.9064	0.9064	0.9064
53	0.9077	0.9077	0.9077	0.9077	0.9077	0.9077	0.9077	0.9077	0.9077	0.9077
54	0.9091	0.9091	0.9091	0.9091	0.9091	0.9091	0.9091	0.9092	0.9092	0.9092
55	0.9105	0.9105	0.9105	0.9106	0.9106	0.9106	0.9106	0.9106	0.9106	0.9106
56	0.9120	0.9120	0.9120	0.9120	0.9120	0.9121	0.9121	0.9121	0.9121	0.9121
57	0.9135	0.9135	0.9135	0.9135	0.9136	0.9136	0.9136	0.9136	0.9136	0.9136
58	0.9150	0.9150	0.9150	0.9151	0.9151	0.9151	0.9151	0.9151	0.9151	0.9151
59	0.9165	0.9166	0.9166	0.9166	0.9167	0.9167	0.9167	0.9167	0.9167	0.9167

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.8992	0.8996	0.8999	0.9003	0.9007	0.9011	0.9016	0.9020	0.9025	0.9029
61	0.8998	0.9001	0.9005	0.9009	0.9013	0.9018	0.9022	0.9027	0.9031	0.9036
62	0.9003	0.9007	0.9011	0.9015	0.9019	0.9024	0.9028	0.9033	0.9038	0.9043
63	0.9009	0.9013	0.9017	0.9021	0.9025	0.9030	0.9034	0.9039	0.9044	0.9049
64	0.9014	0.9018	0.9022	0.9027	0.9031	0.9035	0.9040	0.9045	0.9050	0.9055
65	0.9019	0.9023	0.9028	0.9032	0.9036	0.9041	0.9046	0.9051	0.9056	0.9061
66	0.9024	0.9028	0.9033	0.9037	0.9042	0.9046	0.9051	0.9056	0.9061	0.9067
67	0.9029	0.9033	0.9037	0.9042	0.9047	0.9051	0.9056	0.9061	0.9067	0.9072
68	0.9033	0.9037	0.9042	0.9046	0.9051	0.9056	0.9061	0.9066	0.9072	0.9077
69	0.9037	0.9042	0.9046	0.9051	0.9055	0.9060	0.9066	0.9071	0.9076	0.9082
70	0.9041	0.9045	0.9050	0.9055	0.9059	0.9065	0.9070	0.9075	0.9081	0.9087
71	0.9044	0.9049	0.9053	0.9058	0.9063	0.9068	0.9074	0.9079	0.9085	0.9091
72	0.9047	0.9052	0.9056	0.9061	0.9066	0.9072	0.9077	0.9083	0.9088	0.9094
73	0.9050	0.9054	0.9059	0.9064	0.9069	0.9074	0.9080	0.9086	0.9092	0.9098
74	0.9052	0.9056	0.9061	0.9066	0.9071	0.9077	0.9082	0.9088	0.9094	0.9100

Age	40	41	42	43	44	45	46	47	48	49
60	0.9034	0.9039	0.9044	0.9049	0.9054	0.9059	0.9065	0.9070	0.9075	0.9080
61	0.9041	0.9046	0.9051	0.9056	0.9062	0.9067	0.9072	0.9078	0.9083	0.9089
62	0.9048	0.9053	0.9058	0.9063	0.9069	0.9074	0.9080	0.9086	0.9091	0.9097
63	0.9054	0.9059	0.9065	0.9070	0.9076	0.9082	0.9087	0.9093	0.9099	0.9105
64	0.9060	0.9066	0.9071	0.9077	0.9083	0.9089	0.9095	0.9101	0.9107	0.9113
65	0.9066	0.9072	0.9078	0.9083	0.9089	0.9095	0.9102	0.9108	0.9114	0.9121
66	0.9072	0.9078	0.9084	0.9090	0.9096	0.9102	0.9108	0.9115	0.9121	0.9128
67	0.9078	0.9084	0.9090	0.9096	0.9102	0.9108	0.9115	0.9121	0.9128	0.9135
68	0.9083	0.9089	0.9095	0.9101	0.9108	0.9114	0.9121	0.9128	0.9135	0.9142
69	0.9088	0.9094	0.9100	0.9107	0.9113	0.9120	0.9127	0.9134	0.9141	0.9148
70	0.9093	0.9099	0.9105	0.9112	0.9118	0.9125	0.9132	0.9139	0.9147	0.9154
71	0.9097	0.9103	0.9110	0.9116	0.9123	0.9130	0.9137	0.9145	0.9152	0.9160
72	0.9101	0.9107	0.9114	0.9120	0.9127	0.9134	0.9142	0.9149	0.9157	0.9165
73	0.9104	0.9110	0.9117	0.9124	0.9131	0.9139	0.9146	0.9154	0.9162	0.9170
74	0.9107	0.9114	0.9120	0.9127	0.9135	0.9142	0.9150	0.9158	0.9166	0.9174

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.9086	0.9091	0.9096	0.9102	0.9107	0.9112	0.9117	0.9122	0.9126	0.9131
61	0.9094	0.9100	0.9105	0.9111	0.9116	0.9122	0.9127	0.9132	0.9137	0.9142
62	0.9103	0.9109	0.9114	0.9120	0.9126	0.9132	0.9137	0.9143	0.9148	0.9153
63	0.9111	0.9117	0.9123	0.9129	0.9135	0.9141	0.9147	0.9153	0.9158	0.9164
64	0.9119	0.9126	0.9132	0.9138	0.9144	0.9151	0.9157	0.9163	0.9169	0.9175
65	0.9127	0.9134	0.9140	0.9147	0.9153	0.9160	0.9166	0.9173	0.9179	0.9185
66	0.9135	0.9141	0.9148	0.9155	0.9162	0.9169	0.9175	0.9182	0.9189	0.9195
67	0.9142	0.9149	0.9156	0.9163	0.9170	0.9177	0.9184	0.9191	0.9198	0.9205
68	0.9149	0.9156	0.9163	0.9171	0.9178	0.9185	0.9193	0.9200	0.9208	0.9215
69	0.9155	0.9163	0.9170	0.9178	0.9186	0.9193	0.9201	0.9209	0.9216	0.9224
70	0.9162	0.9169	0.9177	0.9185	0.9193	0.9201	0.9209	0.9217	0.9225	0.9233
71	0.9167	0.9175	0.9183	0.9191	0.9200	0.9208	0.9216	0.9225	0.9233	0.9241
72	0.9173	0.9181	0.9189	0.9198	0.9206	0.9215	0.9223	0.9232	0.9240	0.9249
73	0.9178	0.9186	0.9195	0.9203	0.9212	0.9221	0.9230	0.9238	0.9247	0.9256
74	0.9182	0.9191	0.9199	0.9208	0.9217	0.9226	0.9235	0.9245	0.9254	0.9263

Age	60	61	62	63	64	65	66	67	68	69
60	0.9135	0.9139	0.9144	0.9147	0.9151	0.9154	0.9158	0.9161	0.9163	0.9166
61	0.9147	0.9151	0.9156	0.9160	0.9164	0.9168	0.9171	0.9174	0.9177	0.9180
62	0.9158	0.9163	0.9168	0.9172	0.9177	0.9181	0.9184	0.9188	0.9191	0.9194
63	0.9169	0.9175	0.9180	0.9185	0.9189	0.9194	0.9198	0.9202	0.9205	0.9208
64	0.9180	0.9186	0.9191	0.9197	0.9202	0.9206	0.9211	0.9215	0.9219	0.9223
65	0.9191	0.9197	0.9203	0.9209	0.9214	0.9219	0.9224	0.9228	0.9233	0.9237
66	0.9202	0.9208	0.9214	0.9220	0.9226	0.9231	0.9237	0.9242	0.9246	0.9251
67	0.9212	0.9219	0.9225	0.9232	0.9238	0.9244	0.9249	0.9254	0.9260	0.9264
68	0.9222	0.9229	0.9236	0.9243	0.9249	0.9255	0.9261	0.9267	0.9273	0.9278
69	0.9232	0.9239	0.9246	0.9253	0.9260	0.9267	0.9273	0.9280	0.9285	0.9291
70	0.9241	0.9249	0.9256	0.9264	0.9271	0.9278	0.9285	0.9292	0.9298	0.9304
71	0.9249	0.9258	0.9266	0.9274	0.9281	0.9289	0.9296	0.9303	0.9310	0.9316
72	0.9258	0.9266	0.9275	0.9283	0.9291	0.9299	0.9307	0.9314	0.9321	0.9328
73	0.9265	0.9274	0.9283	0.9292	0.9300	0.9309	0.9317	0.9325	0.9333	0.9340
74	0.9273	0.9282	0.9291	0.9300	0.9309	0.9318	0.9327	0.9335	0.9343	0.9351

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
60	0.9168	0.9170	0.9172	0.9174	0.9175	0.9177	0.9178	0.9179	0.9180	0.9180
61	0.9183	0.9185	0.9187	0.9189	0.9191	0.9192	0.9193	0.9195	0.9196	0.9196
62	0.9197	0.9200	0.9202	0.9204	0.9206	0.9208	0.9209	0.9210	0.9212	0.9213
63	0.9212	0.9214	0.9217	0.9219	0.9221	0.9223	0.9225	0.9226	0.9228	0.9229
64	0.9226	0.9229	0.9232	0.9235	0.9237	0.9239	0.9241	0.9243	0.9244	0.9245
65	0.9240	0.9244	0.9247	0.9250	0.9252	0.9255	0.9257	0.9259	0.9260	0.9262
66	0.9255	0.9258	0.9262	0.9265	0.9268	0.9271	0.9273	0.9275	0.9277	0.9278
67	0.9269	0.9273	0.9277	0.9280	0.9283	0.9286	0.9289	0.9291	0.9293	0.9295
68	0.9283	0.9287	0.9291	0.9295	0.9299	0.9302	0.9305	0.9307	0.9310	0.9312
69	0.9296	0.9301	0.9306	0.9310	0.9314	0.9317	0.9320	0.9323	0.9326	0.9328
70	0.9309	0.9315	0.9320	0.9324	0.9328	0.9332	0.9336	0.9339	0.9342	0.9344
71	0.9322	0.9328	0.9333	0.9338	0.9343	0.9347	0.9351	0.9355	0.9358	0.9361
72	0.9335	0.9341	0.9347	0.9352	0.9357	0.9362	0.9366	0.9370	0.9373	0.9377
73	0.9347	0.9353	0.9360	0.9365	0.9371	0.9376	0.9381	0.9385	0.9389	0.9392
74	0.9358	0.9365	0.9372	0.9378	0.9384	0.9390	0.9395	0.9400	0.9404	0.9408

Age	80	81	82	83	84	85	86	87	88	89
60	0.9181	0.9182	0.9182	0.9182	0.9183	0.9183	0.9183	0.9183	0.9183	0.9183
61	0.9197	0.9198	0.9198	0.9199	0.9199	0.9199	0.9199	0.9200	0.9200	0.9200
62	0.9213	0.9214	0.9215	0.9215	0.9215	0.9216	0.9216	0.9216	0.9216	0.9216
63	0.9230	0.9231	0.9231	0.9232	0.9232	0.9233	0.9233	0.9233	0.9233	0.9233
64	0.9246	0.9247	0.9248	0.9249	0.9249	0.9250	0.9250	0.9250	0.9250	0.9251
65	0.9263	0.9264	0.9265	0.9266	0.9266	0.9267	0.9267	0.9268	0.9268	0.9268
66	0.9280	0.9281	0.9282	0.9283	0.9284	0.9284	0.9285	0.9285	0.9285	0.9286
67	0.9297	0.9298	0.9299	0.9300	0.9301	0.9302	0.9302	0.9303	0.9303	0.9303
68	0.9313	0.9315	0.9316	0.9317	0.9318	0.9319	0.9320	0.9320	0.9321	0.9321
69	0.9330	0.9332	0.9333	0.9335	0.9336	0.9337	0.9338	0.9338	0.9339	0.9339
70	0.9347	0.9349	0.9350	0.9352	0.9353	0.9354	0.9355	0.9356	0.9357	0.9357
71	0.9363	0.9365	0.9367	0.9369	0.9371	0.9372	0.9373	0.9374	0.9374	0.9375
72	0.9379	0.9382	0.9384	0.9386	0.9388	0.9389	0.9390	0.9391	0.9392	0.9393
73	0.9395	0.9398	0.9401	0.9403	0.9405	0.9406	0.9408	0.9409	0.9410	0.9411
74	0.9411	0.9414	0.9417	0.9420	0.9422	0.9424	0.9425	0.9426	0.9428	0.9429

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.9053	0.9058	0.9063	0.9068	0.9073	0.9079	0.9085	0.9090	0.9097	0.9103
76	0.9055	0.9059	0.9064	0.9070	0.9075	0.9080	0.9086	0.9092	0.9098	0.9105
77	0.9055	0.9060	0.9065	0.9070	0.9076	0.9082	0.9087	0.9093	0.9100	0.9106
78	0.9056	0.9061	0.9066	0.9071	0.9076	0.9082	0.9088	0.9094	0.9101	0.9107
79	0.9056	0.9061	0.9066	0.9071	0.9077	0.9082	0.9088	0.9095	0.9101	0.9108
80	0.9055	0.9060	0.9065	0.9071	0.9076	0.9082	0.9088	0.9095	0.9101	0.9108
81	0.9054	0.9059	0.9065	0.9070	0.9076	0.9082	0.9088	0.9094	0.9101	0.9108
82	0.9053	0.9058	0.9063	0.9069	0.9075	0.9081	0.9087	0.9094	0.9100	0.9107
83	0.9051	0.9056	0.9062	0.9068	0.9073	0.9080	0.9086	0.9092	0.9099	0.9106
84	0.9049	0.9055	0.9060	0.9066	0.9072	0.9078	0.9084	0.9091	0.9098	0.9105
85	0.9047	0.9052	0.9058	0.9064	0.9070	0.9076	0.9082	0.9089	0.9096	0.9103
86	0.9044	0.9050	0.9055	0.9061	0.9067	0.9074	0.9080	0.9087	0.9094	0.9101
87	0.9041	0.9047	0.9052	0.9058	0.9064	0.9071	0.9077	0.9084	0.9091	0.9099
88	0.9038	0.9043	0.9049	0.9055	0.9061	0.9068	0.9074	0.9081	0.9089	0.9096
89	0.9034	0.9040	0.9046	0.9052	0.9058	0.9064	0.9071	0.9078	0.9085	0.9093

Age	40	41	42	43	44	45	46	47	48	49
75	0.9109	0.9116	0.9123	0.9130	0.9138	0.9145	0.9153	0.9161	0.9169	0.9178
76	0.9111	0.9118	0.9125	0.9133	0.9140	0.9148	0.9156	0.9164	0.9172	0.9181
77	0.9113	0.9120	0.9127	0.9135	0.9142	0.9150	0.9158	0.9167	0.9175	0.9184
78	0.9114	0.9121	0.9129	0.9136	0.9144	0.9152	0.9160	0.9169	0.9177	0.9186
79	0.9115	0.9122	0.9130	0.9137	0.9145	0.9153	0.9162	0.9170	0.9179	0.9188
80	0.9115	0.9122	0.9130	0.9138	0.9146	0.9154	0.9163	0.9171	0.9180	0.9190
81	0.9115	0.9122	0.9130	0.9138	0.9146	0.9155	0.9163	0.9172	0.9181	0.9191
82	0.9115	0.9122	0.9130	0.9138	0.9146	0.9155	0.9163	0.9172	0.9182	0.9191
83	0.9114	0.9121	0.9129	0.9137	0.9146	0.9154	0.9163	0.9172	0.9182	0.9191
84	0.9112	0.9120	0.9128	0.9136	0.9145	0.9154	0.9163	0.9172	0.9181	0.9191
85	0.9111	0.9119	0.9127	0.9135	0.9144	0.9152	0.9162	0.9171	0.9181	0.9191
86	0.9109	0.9117	0.9125	0.9133	0.9142	0.9151	0.9160	0.9170	0.9179	0.9190
87	0.9107	0.9115	0.9123	0.9131	0.9140	0.9149	0.9158	0.9168	0.9178	0.9188
88	0.9104	0.9112	0.9120	0.9129	0.9138	0.9147	0.9156	0.9166	0.9176	0.9186
89	0.9101	0.9109	0.9117	0.9126	0.9135	0.9144	0.9154	0.9164	0.9174	0.9184

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member		Beneficiary									
Age		50	51	52	53	54	55	56	57	58	59
	75	0.9186	0.9195	0.9204	0.9213	0.9222	0.9231	0.9241	0.9250	0.9260	0.9270
	76	0.9190	0.9199	0.9208	0.9217	0.9227	0.9236	0.9246	0.9256	0.9266	0.9276
	77	0.9193	0.9202	0.9211	0.9221	0.9230	0.9240	0.9250	0.9260	0.9270	0.9281
	78	0.9195	0.9205	0.9214	0.9224	0.9234	0.9244	0.9254	0.9264	0.9275	0.9285
	79	0.9197	0.9207	0.9217	0.9226	0.9237	0.9247	0.9257	0.9268	0.9279	0.9290
	80	0.9199	0.9209	0.9219	0.9229	0.9239	0.9249	0.9260	0.9271	0.9282	0.9293
	81	0.9200	0.9210	0.9220	0.9230	0.9241	0.9252	0.9263	0.9274	0.9285	0.9296
	82	0.9201	0.9211	0.9221	0.9232	0.9242	0.9253	0.9264	0.9276	0.9287	0.9299
	83	0.9201	0.9211	0.9222	0.9232	0.9243	0.9254	0.9266	0.9277	0.9289	0.9301
	84	0.9201	0.9211	0.9222	0.9233	0.9244	0.9255	0.9267	0.9279	0.9291	0.9303
	85	0.9201	0.9211	0.9222	0.9233	0.9244	0.9256	0.9267	0.9279	0.9292	0.9304
	86	0.9200	0.9210	0.9221	0.9232	0.9244	0.9256	0.9267	0.9280	0.9292	0.9305
	87	0.9199	0.9209	0.9220	0.9232	0.9243	0.9255	0.9267	0.9279	0.9292	0.9305
	88	0.9197	0.9208	0.9219	0.9230	0.9242	0.9254	0.9266	0.9279	0.9292	0.9305
	89	0.9195	0.9206	0.9217	0.9229	0.9241	0.9253	0.9265	0.9278	0.9291	0.9304

Age		60	61	62	63	64	65	66	67	68	69
	75	0.9279	0.9289	0.9299	0.9308	0.9318	0.9327	0.9336	0.9345	0.9353	0.9361
	76	0.9286	0.9296	0.9306	0.9315	0.9325	0.9335	0.9344	0.9354	0.9363	0.9371
	77	0.9291	0.9301	0.9312	0.9322	0.9332	0.9342	0.9352	0.9362	0.9371	0.9381
	78	0.9296	0.9307	0.9318	0.9328	0.9339	0.9349	0.9360	0.9370	0.9380	0.9389
	79	0.9301	0.9312	0.9323	0.9334	0.9345	0.9356	0.9366	0.9377	0.9387	0.9397
	80	0.9305	0.9316	0.9327	0.9339	0.9350	0.9361	0.9372	0.9383	0.9394	0.9405
	81	0.9308	0.9320	0.9331	0.9343	0.9355	0.9366	0.9378	0.9389	0.9401	0.9412
	82	0.9311	0.9323	0.9335	0.9347	0.9359	0.9371	0.9383	0.9395	0.9406	0.9418
	83	0.9313	0.9325	0.9338	0.9350	0.9362	0.9375	0.9387	0.9399	0.9411	0.9423
	84	0.9315	0.9328	0.9340	0.9353	0.9366	0.9378	0.9391	0.9404	0.9416	0.9428
	85	0.9317	0.9329	0.9342	0.9355	0.9368	0.9381	0.9394	0.9407	0.9420	0.9433
	86	0.9317	0.9330	0.9344	0.9357	0.9370	0.9384	0.9397	0.9410	0.9423	0.9437
	87	0.9318	0.9331	0.9345	0.9358	0.9372	0.9385	0.9399	0.9413	0.9426	0.9440
	88	0.9318	0.9331	0.9345	0.9359	0.9373	0.9387	0.9401	0.9415	0.9429	0.9442
	89	0.9318	0.9331	0.9345	0.9359	0.9373	0.9387	0.9402	0.9416	0.9430	0.9444

Table 4a - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.9369	0.9377	0.9384	0.9391	0.9397	0.9403	0.9409	0.9414	0.9418	0.9423
76	0.9380	0.9388	0.9395	0.9403	0.9410	0.9416	0.9422	0.9427	0.9433	0.9437
77	0.9390	0.9398	0.9406	0.9414	0.9421	0.9428	0.9435	0.9441	0.9446	0.9451
78	0.9399	0.9408	0.9416	0.9425	0.9432	0.9440	0.9447	0.9453	0.9459	0.9465
79	0.9407	0.9417	0.9426	0.9435	0.9443	0.9451	0.9458	0.9465	0.9472	0.9478
80	0.9415	0.9425	0.9435	0.9444	0.9453	0.9461	0.9469	0.9477	0.9484	0.9490
81	0.9422	0.9433	0.9443	0.9453	0.9462	0.9471	0.9479	0.9487	0.9495	0.9502
82	0.9429	0.9440	0.9451	0.9461	0.9471	0.9480	0.9489	0.9497	0.9505	0.9513
83	0.9435	0.9446	0.9457	0.9468	0.9479	0.9488	0.9498	0.9507	0.9515	0.9523
84	0.9440	0.9452	0.9464	0.9475	0.9486	0.9496	0.9506	0.9516	0.9525	0.9533
85	0.9445	0.9458	0.9470	0.9481	0.9493	0.9503	0.9514	0.9524	0.9533	0.9542
86	0.9449	0.9462	0.9475	0.9487	0.9499	0.9510	0.9521	0.9531	0.9541	0.9551
87	0.9453	0.9466	0.9479	0.9492	0.9504	0.9516	0.9527	0.9538	0.9549	0.9559
88	0.9456	0.9470	0.9483	0.9496	0.9509	0.9521	0.9533	0.9544	0.9555	0.9566
89	0.9458	0.9472	0.9486	0.9499	0.9513	0.9525	0.9538	0.9550	0.9561	0.9572

Age	80	81	82	83	84	85	86	87	88	89
75	0.9427	0.9430	0.9433	0.9436	0.9438	0.9440	0.9442	0.9444	0.9445	0.9446
76	0.9441	0.9445	0.9449	0.9452	0.9454	0.9457	0.9459	0.9461	0.9462	0.9463
77	0.9456	0.9460	0.9464	0.9467	0.9470	0.9473	0.9475	0.9477	0.9479	0.9481
78	0.9470	0.9474	0.9479	0.9482	0.9486	0.9489	0.9491	0.9494	0.9496	0.9497
79	0.9483	0.9488	0.9493	0.9497	0.9501	0.9504	0.9507	0.9509	0.9512	0.9514
80	0.9496	0.9501	0.9506	0.9511	0.9515	0.9519	0.9522	0.9525	0.9527	0.9530
81	0.9508	0.9514	0.9520	0.9524	0.9529	0.9533	0.9537	0.9540	0.9543	0.9545
82	0.9520	0.9526	0.9532	0.9537	0.9542	0.9547	0.9551	0.9554	0.9558	0.9560
83	0.9531	0.9538	0.9544	0.9550	0.9555	0.9560	0.9564	0.9568	0.9572	0.9575
84	0.9541	0.9548	0.9555	0.9562	0.9567	0.9573	0.9577	0.9582	0.9586	0.9589
85	0.9551	0.9559	0.9566	0.9573	0.9579	0.9585	0.9590	0.9595	0.9599	0.9603
86	0.9560	0.9568	0.9576	0.9583	0.9590	0.9596	0.9602	0.9607	0.9612	0.9616
87	0.9568	0.9577	0.9585	0.9593	0.9600	0.9607	0.9613	0.9619	0.9624	0.9629
88	0.9576	0.9585	0.9594	0.9602	0.9610	0.9617	0.9624	0.9630	0.9636	0.9641
89	0.9583	0.9593	0.9602	0.9611	0.9619	0.9627	0.9634	0.9641	0.9647	0.9652

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	50% Joint and Survivor Annuity

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		30	31	32	33	34	35	36	37	38	39
	30	0.7691	0.7694	0.7696	0.7699	0.7701	0.7703	0.7706	0.7708	0.7710	0.7712
	31	0.7700	0.7703	0.7706	0.7708	0.7711	0.7713	0.7716	0.7718	0.7720	0.7723
	32	0.7709	0.7712	0.7715	0.7718	0.7721	0.7723	0.7726	0.7729	0.7731	0.7733
	33	0.7719	0.7722	0.7725	0.7728	0.7731	0.7734	0.7736	0.7739	0.7742	0.7744
	34	0.7728	0.7731	0.7735	0.7738	0.7741	0.7744	0.7747	0.7750	0.7753	0.7756
	35	0.7738	0.7741	0.7745	0.7748	0.7752	0.7755	0.7758	0.7761	0.7764	0.7767
	36	0.7748	0.7751	0.7755	0.7759	0.7762	0.7766	0.7769	0.7773	0.7776	0.7779
	37	0.7758	0.7762	0.7765	0.7769	0.7773	0.7777	0.7780	0.7784	0.7788	0.7791
	38	0.7768	0.7772	0.7776	0.7780	0.7784	0.7788	0.7792	0.7796	0.7800	0.7803
	39	0.7778	0.7782	0.7787	0.7791	0.7795	0.7799	0.7804	0.7808	0.7812	0.7816
	40	0.7789	0.7793	0.7798	0.7802	0.7806	0.7811	0.7815	0.7820	0.7824	0.7828
	41	0.7799	0.7804	0.7809	0.7813	0.7818	0.7823	0.7827	0.7832	0.7836	0.7841
	42	0.7810	0.7815	0.7820	0.7825	0.7829	0.7834	0.7839	0.7844	0.7849	0.7853
	43	0.7821	0.7826	0.7831	0.7836	0.7841	0.7846	0.7851	0.7856	0.7861	0.7866
	44	0.7832	0.7837	0.7842	0.7848	0.7853	0.7858	0.7864	0.7869	0.7874	0.7879

Age		40	41	42	43	44	45	46	47	48	49
	30	0.7714	0.7716	0.7717	0.7719	0.7721	0.7722	0.7724	0.7725	0.7726	0.7727
	31	0.7725	0.7727	0.7729	0.7730	0.7732	0.7734	0.7735	0.7737	0.7738	0.7739
	32	0.7736	0.7738	0.7740	0.7742	0.7744	0.7746	0.7747	0.7749	0.7750	0.7752
	33	0.7747	0.7749	0.7752	0.7754	0.7756	0.7758	0.7760	0.7761	0.7763	0.7765
	34	0.7758	0.7761	0.7764	0.7766	0.7768	0.7770	0.7772	0.7774	0.7776	0.7778
	35	0.7770	0.7773	0.7776	0.7778	0.7781	0.7783	0.7785	0.7787	0.7789	0.7791
	36	0.7782	0.7785	0.7788	0.7791	0.7794	0.7796	0.7799	0.7801	0.7803	0.7805
	37	0.7794	0.7798	0.7801	0.7804	0.7807	0.7809	0.7812	0.7815	0.7817	0.7819
	38	0.7807	0.7810	0.7814	0.7817	0.7820	0.7823	0.7826	0.7829	0.7831	0.7834
	39	0.7819	0.7823	0.7827	0.7830	0.7834	0.7837	0.7840	0.7843	0.7846	0.7849
	40	0.7832	0.7836	0.7840	0.7844	0.7847	0.7851	0.7854	0.7858	0.7861	0.7864
	41	0.7845	0.7849	0.7854	0.7858	0.7862	0.7865	0.7869	0.7873	0.7876	0.7879
	42	0.7858	0.7863	0.7867	0.7872	0.7876	0.7880	0.7884	0.7888	0.7891	0.7895
	43	0.7871	0.7876	0.7881	0.7886	0.7890	0.7895	0.7899	0.7903	0.7907	0.7911
	44	0.7885	0.7890	0.7895	0.7900	0.7905	0.7909	0.7914	0.7918	0.7923	0.7927

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.7728	0.7729	0.7730	0.7731	0.7732	0.7733	0.7734	0.7734	0.7735	0.7735
31	0.7741	0.7742	0.7743	0.7744	0.7745	0.7745	0.7746	0.7747	0.7748	0.7748
32	0.7753	0.7754	0.7756	0.7757	0.7758	0.7759	0.7759	0.7760	0.7761	0.7762
33	0.7766	0.7767	0.7769	0.7770	0.7771	0.7772	0.7773	0.7774	0.7775	0.7775
34	0.7779	0.7781	0.7782	0.7784	0.7785	0.7786	0.7787	0.7788	0.7789	0.7790
35	0.7793	0.7795	0.7796	0.7798	0.7799	0.7800	0.7801	0.7802	0.7803	0.7804
36	0.7807	0.7809	0.7811	0.7812	0.7814	0.7815	0.7816	0.7817	0.7819	0.7819
37	0.7821	0.7823	0.7825	0.7827	0.7829	0.7830	0.7832	0.7833	0.7834	0.7835
38	0.7836	0.7838	0.7840	0.7842	0.7844	0.7846	0.7847	0.7849	0.7850	0.7851
39	0.7851	0.7854	0.7856	0.7858	0.7860	0.7862	0.7863	0.7865	0.7867	0.7868
40	0.7866	0.7869	0.7872	0.7874	0.7876	0.7878	0.7880	0.7882	0.7883	0.7885
41	0.7882	0.7885	0.7888	0.7890	0.7893	0.7895	0.7897	0.7899	0.7901	0.7902
42	0.7898	0.7901	0.7904	0.7907	0.7910	0.7912	0.7914	0.7917	0.7919	0.7920
43	0.7914	0.7918	0.7921	0.7924	0.7927	0.7930	0.7932	0.7935	0.7937	0.7939
44	0.7931	0.7934	0.7938	0.7941	0.7945	0.7948	0.7950	0.7953	0.7955	0.7958

Age	60	61	62	63	64	65	66	67	68	69
30	0.7736	0.7736	0.7737	0.7737	0.7737	0.7738	0.7738	0.7738	0.7738	0.7738
31	0.7749	0.7749	0.7750	0.7750	0.7750	0.7751	0.7751	0.7751	0.7751	0.7752
32	0.7762	0.7763	0.7763	0.7764	0.7764	0.7764	0.7765	0.7765	0.7765	0.7765
33	0.7776	0.7777	0.7777	0.7778	0.7778	0.7778	0.7779	0.7779	0.7779	0.7780
34	0.7790	0.7791	0.7792	0.7792	0.7793	0.7793	0.7793	0.7794	0.7794	0.7794
35	0.7805	0.7806	0.7807	0.7807	0.7808	0.7808	0.7809	0.7809	0.7809	0.7810
36	0.7820	0.7821	0.7822	0.7823	0.7823	0.7824	0.7824	0.7825	0.7825	0.7825
37	0.7836	0.7837	0.7838	0.7839	0.7839	0.7840	0.7840	0.7841	0.7841	0.7842
38	0.7852	0.7853	0.7854	0.7855	0.7856	0.7857	0.7857	0.7858	0.7858	0.7859
39	0.7869	0.7870	0.7871	0.7872	0.7873	0.7874	0.7874	0.7875	0.7876	0.7876
40	0.7886	0.7888	0.7889	0.7890	0.7891	0.7892	0.7892	0.7893	0.7893	0.7894
41	0.7904	0.7905	0.7907	0.7908	0.7909	0.7910	0.7911	0.7911	0.7912	0.7913
42	0.7922	0.7924	0.7925	0.7926	0.7928	0.7929	0.7929	0.7930	0.7931	0.7932
43	0.7941	0.7942	0.7944	0.7945	0.7947	0.7948	0.7949	0.7950	0.7951	0.7951
44	0.7960	0.7962	0.7963	0.7965	0.7966	0.7968	0.7969	0.7970	0.7971	0.7972

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780	0.7781	0.7781
34	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795
35	0.7810	0.7810	0.7810	0.7810	0.7810	0.7811	0.7811	0.7811	0.7811	0.7811
36	0.7826	0.7826	0.7826	0.7826	0.7826	0.7826	0.7827	0.7827	0.7827	0.7827
37	0.7842	0.7842	0.7842	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843
38	0.7859	0.7859	0.7859	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860
39	0.7876	0.7877	0.7877	0.7877	0.7877	0.7878	0.7878	0.7878	0.7878	0.7878
40	0.7894	0.7895	0.7895	0.7895	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896
41	0.7913	0.7913	0.7914	0.7914	0.7914	0.7915	0.7915	0.7915	0.7915	0.7915
42	0.7932	0.7933	0.7933	0.7933	0.7934	0.7934	0.7934	0.7934	0.7934	0.7935
43	0.7952	0.7953	0.7953	0.7953	0.7954	0.7954	0.7954	0.7954	0.7955	0.7955
44	0.7972	0.7973	0.7973	0.7974	0.7974	0.7975	0.7975	0.7975	0.7975	0.7975

Age	80	81	82	83	84	85	86	87	88	89
30	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7780
34	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795	0.7795
35	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811
36	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827
37	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843
38	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860	0.7860
39	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878
40	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896	0.7896
41	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915
42	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935
43	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955
44	0.7975	0.7975	0.7976	0.7976	0.7976	0.7976	0.7976	0.7976	0.7976	0.7975

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.7843	0.7848	0.7854	0.7859	0.7865	0.7870	0.7876	0.7881	0.7887	0.7893
46	0.7854	0.7860	0.7865	0.7871	0.7877	0.7882	0.7888	0.7894	0.7900	0.7906
47	0.7865	0.7871	0.7877	0.7883	0.7889	0.7895	0.7901	0.7907	0.7913	0.7919
48	0.7877	0.7883	0.7889	0.7895	0.7901	0.7907	0.7913	0.7920	0.7926	0.7933
49	0.7888	0.7894	0.7900	0.7907	0.7913	0.7919	0.7926	0.7933	0.7939	0.7946
50	0.7899	0.7906	0.7912	0.7919	0.7925	0.7932	0.7939	0.7946	0.7953	0.7959
51	0.7911	0.7917	0.7924	0.7931	0.7937	0.7944	0.7951	0.7959	0.7966	0.7973
52	0.7923	0.7929	0.7936	0.7943	0.7950	0.7957	0.7964	0.7972	0.7979	0.7987
53	0.7934	0.7941	0.7948	0.7955	0.7962	0.7969	0.7977	0.7985	0.7992	0.8000
54	0.7946	0.7953	0.7960	0.7967	0.7974	0.7982	0.7990	0.7997	0.8005	0.8014
55	0.7957	0.7964	0.7972	0.7979	0.7987	0.7994	0.8002	0.8010	0.8019	0.8027
56	0.7969	0.7976	0.7983	0.7991	0.7999	0.8007	0.8015	0.8023	0.8032	0.8040
57	0.7980	0.7987	0.7995	0.8003	0.8011	0.8019	0.8027	0.8036	0.8045	0.8054
58	0.7991	0.7999	0.8007	0.8015	0.8023	0.8031	0.8040	0.8048	0.8057	0.8067
59	0.8002	0.8010	0.8018	0.8026	0.8035	0.8043	0.8052	0.8061	0.8070	0.8079

Age	40	41	42	43	44	45	46	47	48	49
45	0.7898	0.7904	0.7909	0.7914	0.7919	0.7924	0.7929	0.7934	0.7939	0.7943
46	0.7912	0.7917	0.7923	0.7929	0.7934	0.7940	0.7945	0.7950	0.7955	0.7960
47	0.7925	0.7931	0.7937	0.7943	0.7949	0.7955	0.7960	0.7966	0.7971	0.7976
48	0.7939	0.7945	0.7952	0.7958	0.7964	0.7970	0.7976	0.7982	0.7988	0.7993
49	0.7953	0.7959	0.7966	0.7973	0.7979	0.7986	0.7992	0.7998	0.8004	0.8010
50	0.7966	0.7973	0.7980	0.7987	0.7994	0.8001	0.8008	0.8014	0.8021	0.8027
51	0.7980	0.7988	0.7995	0.8002	0.8009	0.8017	0.8024	0.8031	0.8038	0.8044
52	0.7994	0.8002	0.8009	0.8017	0.8025	0.8032	0.8040	0.8047	0.8054	0.8061
53	0.8008	0.8016	0.8024	0.8032	0.8040	0.8048	0.8056	0.8063	0.8071	0.8079
54	0.8022	0.8030	0.8038	0.8047	0.8055	0.8063	0.8071	0.8080	0.8088	0.8096
55	0.8035	0.8044	0.8053	0.8061	0.8070	0.8079	0.8087	0.8096	0.8104	0.8113
56	0.8049	0.8058	0.8067	0.8076	0.8085	0.8094	0.8103	0.8112	0.8121	0.8130
57	0.8063	0.8072	0.8081	0.8090	0.8100	0.8109	0.8119	0.8128	0.8137	0.8147
58	0.8076	0.8085	0.8095	0.8105	0.8114	0.8124	0.8134	0.8144	0.8154	0.8164
59	0.8089	0.8099	0.8109	0.8119	0.8129	0.8139	0.8149	0.8160	0.8170	0.8180

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.7947	0.7951	0.7955	0.7959	0.7962	0.7966	0.7969	0.7972	0.7974	0.7977
46	0.7964	0.7969	0.7973	0.7977	0.7981	0.7984	0.7988	0.7991	0.7994	0.7997
47	0.7981	0.7986	0.7991	0.7995	0.7999	0.8003	0.8007	0.8010	0.8013	0.8016
48	0.7999	0.8004	0.8009	0.8013	0.8018	0.8022	0.8026	0.8030	0.8033	0.8037
49	0.8016	0.8021	0.8027	0.8032	0.8037	0.8041	0.8046	0.8050	0.8054	0.8057
50	0.8033	0.8039	0.8045	0.8050	0.8056	0.8061	0.8066	0.8070	0.8074	0.8078
51	0.8051	0.8057	0.8063	0.8069	0.8075	0.8080	0.8086	0.8091	0.8095	0.8100
52	0.8068	0.8075	0.8082	0.8088	0.8094	0.8100	0.8106	0.8111	0.8116	0.8121
53	0.8086	0.8093	0.8100	0.8107	0.8114	0.8120	0.8126	0.8132	0.8138	0.8143
54	0.8104	0.8111	0.8119	0.8126	0.8133	0.8140	0.8147	0.8153	0.8159	0.8165
55	0.8121	0.8129	0.8137	0.8145	0.8153	0.8160	0.8167	0.8174	0.8180	0.8187
56	0.8139	0.8147	0.8156	0.8164	0.8172	0.8180	0.8188	0.8195	0.8202	0.8209
57	0.8156	0.8165	0.8174	0.8183	0.8192	0.8200	0.8208	0.8216	0.8223	0.8231
58	0.8173	0.8183	0.8192	0.8202	0.8211	0.8220	0.8228	0.8237	0.8245	0.8253
59	0.8190	0.8200	0.8210	0.8220	0.8230	0.8239	0.8249	0.8258	0.8266	0.8275

Age	60	61	62	63	64	65	66	67	68	69
45	0.7979	0.7981	0.7983	0.7985	0.7987	0.7988	0.7989	0.7990	0.7992	0.7992
46	0.7999	0.8001	0.8004	0.8006	0.8007	0.8009	0.8010	0.8012	0.8013	0.8014
47	0.8019	0.8022	0.8024	0.8026	0.8028	0.8030	0.8032	0.8033	0.8035	0.8036
48	0.8040	0.8043	0.8045	0.8048	0.8050	0.8052	0.8054	0.8055	0.8057	0.8058
49	0.8061	0.8064	0.8067	0.8070	0.8072	0.8074	0.8076	0.8078	0.8080	0.8081
50	0.8082	0.8086	0.8089	0.8092	0.8095	0.8097	0.8099	0.8101	0.8103	0.8105
51	0.8104	0.8108	0.8111	0.8114	0.8117	0.8120	0.8123	0.8125	0.8127	0.8129
52	0.8126	0.8130	0.8134	0.8137	0.8141	0.8144	0.8147	0.8149	0.8151	0.8153
53	0.8148	0.8152	0.8157	0.8161	0.8164	0.8168	0.8171	0.8174	0.8176	0.8178
54	0.8170	0.8175	0.8180	0.8184	0.8188	0.8192	0.8195	0.8199	0.8201	0.8204
55	0.8192	0.8198	0.8203	0.8208	0.8212	0.8217	0.8220	0.8224	0.8227	0.8230
56	0.8215	0.8221	0.8227	0.8232	0.8237	0.8241	0.8246	0.8250	0.8253	0.8256
57	0.8238	0.8244	0.8250	0.8256	0.8262	0.8267	0.8271	0.8275	0.8279	0.8283
58	0.8260	0.8267	0.8274	0.8280	0.8286	0.8292	0.8297	0.8302	0.8306	0.8310
59	0.8283	0.8291	0.8298	0.8305	0.8311	0.8317	0.8323	0.8328	0.8333	0.8337

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.7993	0.7994	0.7994	0.7995	0.7995	0.7996	0.7996	0.7996	0.7996	0.7997
46	0.8015	0.8015	0.8016	0.8017	0.8017	0.8018	0.8018	0.8018	0.8018	0.8019
47	0.8037	0.8038	0.8038	0.8039	0.8040	0.8040	0.8040	0.8041	0.8041	0.8041
48	0.8059	0.8060	0.8061	0.8062	0.8062	0.8063	0.8063	0.8064	0.8064	0.8064
49	0.8082	0.8084	0.8084	0.8085	0.8086	0.8087	0.8087	0.8088	0.8088	0.8088
50	0.8106	0.8107	0.8108	0.8109	0.8110	0.8111	0.8111	0.8112	0.8112	0.8113
51	0.8130	0.8132	0.8133	0.8134	0.8135	0.8136	0.8136	0.8137	0.8137	0.8138
52	0.8155	0.8157	0.8158	0.8159	0.8160	0.8161	0.8162	0.8163	0.8163	0.8164
53	0.8180	0.8182	0.8184	0.8185	0.8186	0.8187	0.8188	0.8189	0.8189	0.8190
54	0.8206	0.8208	0.8210	0.8211	0.8213	0.8214	0.8215	0.8216	0.8216	0.8217
55	0.8232	0.8235	0.8237	0.8238	0.8240	0.8241	0.8242	0.8243	0.8244	0.8245
56	0.8259	0.8262	0.8264	0.8266	0.8267	0.8269	0.8270	0.8271	0.8272	0.8273
57	0.8286	0.8289	0.8291	0.8294	0.8296	0.8297	0.8299	0.8300	0.8301	0.8302
58	0.8313	0.8317	0.8319	0.8322	0.8324	0.8326	0.8328	0.8329	0.8330	0.8331
59	0.8341	0.8345	0.8348	0.8351	0.8353	0.8355	0.8357	0.8359	0.8360	0.8361

Age	80	81	82	83	84	85	86	87	88	89
45	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997
46	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019
47	0.8041	0.8041	0.8041	0.8042	0.8042	0.8042	0.8042	0.8042	0.8042	0.8041
48	0.8064	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065
49	0.8088	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089
50	0.8113	0.8113	0.8113	0.8113	0.8113	0.8113	0.8113	0.8113	0.8113	0.8113
51	0.8138	0.8138	0.8138	0.8139	0.8139	0.8139	0.8139	0.8139	0.8139	0.8139
52	0.8164	0.8164	0.8164	0.8164	0.8165	0.8165	0.8165	0.8165	0.8165	0.8165
53	0.8190	0.8191	0.8191	0.8191	0.8191	0.8191	0.8191	0.8191	0.8191	0.8191
54	0.8217	0.8218	0.8218	0.8218	0.8218	0.8219	0.8219	0.8219	0.8219	0.8219
55	0.8245	0.8246	0.8246	0.8246	0.8246	0.8247	0.8247	0.8247	0.8247	0.8247
56	0.8274	0.8274	0.8275	0.8275	0.8275	0.8275	0.8275	0.8275	0.8275	0.8275
57	0.8303	0.8303	0.8304	0.8304	0.8304	0.8305	0.8305	0.8305	0.8305	0.8305
58	0.8332	0.8333	0.8333	0.8334	0.8334	0.8335	0.8335	0.8335	0.8335	0.8335
59	0.8362	0.8363	0.8364	0.8364	0.8365	0.8365	0.8365	0.8365	0.8366	0.8366

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member		Beneficiary									
Age		30	31	32	33	34	35	36	37	38	39
	60	0.8013	0.8021	0.8029	0.8038	0.8046	0.8055	0.8064	0.8073	0.8082	0.8092
	61	0.8024	0.8032	0.8040	0.8049	0.8057	0.8066	0.8075	0.8085	0.8095	0.8104
	62	0.8034	0.8042	0.8051	0.8059	0.8068	0.8077	0.8087	0.8096	0.8106	0.8117
	63	0.8044	0.8052	0.8061	0.8070	0.8079	0.8088	0.8098	0.8108	0.8118	0.8128
	64	0.8054	0.8062	0.8071	0.8080	0.8089	0.8099	0.8108	0.8118	0.8129	0.8139
	65	0.8063	0.8071	0.8080	0.8089	0.8099	0.8109	0.8119	0.8129	0.8139	0.8150
	66	0.8071	0.8080	0.8089	0.8098	0.8108	0.8118	0.8128	0.8139	0.8149	0.8161
	67	0.8080	0.8088	0.8098	0.8107	0.8117	0.8127	0.8137	0.8148	0.8159	0.8170
	68	0.8087	0.8096	0.8105	0.8115	0.8125	0.8135	0.8146	0.8157	0.8168	0.8179
	69	0.8094	0.8103	0.8112	0.8122	0.8132	0.8143	0.8154	0.8165	0.8176	0.8188
	70	0.8100	0.8109	0.8119	0.8129	0.8139	0.8150	0.8161	0.8172	0.8184	0.8196
	71	0.8106	0.8115	0.8125	0.8135	0.8145	0.8156	0.8167	0.8179	0.8191	0.8203
	72	0.8110	0.8120	0.8130	0.8140	0.8151	0.8162	0.8173	0.8185	0.8197	0.8209
	73	0.8114	0.8124	0.8134	0.8144	0.8155	0.8166	0.8178	0.8190	0.8202	0.8215
	74	0.8117	0.8127	0.8137	0.8148	0.8159	0.8170	0.8182	0.8194	0.8206	0.8219

Age		40	41	42	43	44	45	46	47	48	49
	60	0.8102	0.8112	0.8122	0.8133	0.8143	0.8154	0.8164	0.8175	0.8186	0.8196
	61	0.8115	0.8125	0.8135	0.8146	0.8157	0.8168	0.8179	0.8190	0.8201	0.8212
	62	0.8127	0.8138	0.8148	0.8159	0.8170	0.8182	0.8193	0.8205	0.8216	0.8228
	63	0.8139	0.8150	0.8161	0.8172	0.8184	0.8195	0.8207	0.8219	0.8231	0.8243
	64	0.8150	0.8162	0.8173	0.8185	0.8196	0.8208	0.8221	0.8233	0.8245	0.8258
	65	0.8161	0.8173	0.8185	0.8196	0.8209	0.8221	0.8233	0.8246	0.8259	0.8272
	66	0.8172	0.8184	0.8196	0.8208	0.8220	0.8233	0.8246	0.8259	0.8272	0.8286
	67	0.8182	0.8194	0.8206	0.8219	0.8231	0.8244	0.8258	0.8271	0.8285	0.8299
	68	0.8191	0.8204	0.8216	0.8229	0.8242	0.8255	0.8269	0.8283	0.8297	0.8311
	69	0.8200	0.8213	0.8225	0.8238	0.8252	0.8266	0.8279	0.8294	0.8308	0.8323
	70	0.8208	0.8221	0.8234	0.8247	0.8261	0.8275	0.8289	0.8304	0.8319	0.8334
	71	0.8215	0.8228	0.8242	0.8255	0.8269	0.8284	0.8298	0.8313	0.8329	0.8344
	72	0.8222	0.8235	0.8249	0.8263	0.8277	0.8292	0.8307	0.8322	0.8338	0.8353
	73	0.8228	0.8241	0.8255	0.8269	0.8284	0.8299	0.8314	0.8330	0.8346	0.8362
	74	0.8233	0.8246	0.8260	0.8275	0.8290	0.8305	0.8321	0.8337	0.8353	0.8370

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.8207	0.8218	0.8228	0.8239	0.8249	0.8259	0.8269	0.8278	0.8288	0.8297
61	0.8223	0.8235	0.8246	0.8257	0.8267	0.8278	0.8288	0.8299	0.8309	0.8318
62	0.8240	0.8251	0.8263	0.8274	0.8286	0.8297	0.8308	0.8319	0.8329	0.8340
63	0.8255	0.8267	0.8279	0.8291	0.8303	0.8315	0.8327	0.8338	0.8350	0.8361
64	0.8270	0.8283	0.8296	0.8308	0.8321	0.8333	0.8346	0.8358	0.8370	0.8381
65	0.8285	0.8298	0.8311	0.8324	0.8338	0.8351	0.8364	0.8376	0.8389	0.8401
66	0.8299	0.8313	0.8326	0.8340	0.8354	0.8367	0.8381	0.8394	0.8408	0.8421
67	0.8313	0.8327	0.8341	0.8355	0.8369	0.8384	0.8398	0.8412	0.8426	0.8440
68	0.8326	0.8340	0.8355	0.8370	0.8384	0.8399	0.8414	0.8429	0.8443	0.8458
69	0.8338	0.8353	0.8368	0.8383	0.8399	0.8414	0.8429	0.8445	0.8460	0.8475
70	0.8349	0.8365	0.8380	0.8396	0.8412	0.8428	0.8444	0.8460	0.8476	0.8492
71	0.8360	0.8376	0.8392	0.8408	0.8425	0.8441	0.8458	0.8475	0.8491	0.8508
72	0.8370	0.8386	0.8403	0.8419	0.8436	0.8454	0.8471	0.8488	0.8505	0.8523
73	0.8379	0.8395	0.8412	0.8430	0.8447	0.8465	0.8483	0.8501	0.8519	0.8536
74	0.8387	0.8404	0.8421	0.8439	0.8457	0.8475	0.8494	0.8512	0.8531	0.8549

Age	60	61	62	63	64	65	66	67	68	69
60	0.8305	0.8314	0.8321	0.8329	0.8336	0.8343	0.8349	0.8354	0.8360	0.8365
61	0.8328	0.8336	0.8345	0.8353	0.8361	0.8368	0.8375	0.8381	0.8387	0.8392
62	0.8350	0.8359	0.8368	0.8377	0.8385	0.8393	0.8401	0.8407	0.8414	0.8420
63	0.8371	0.8381	0.8391	0.8401	0.8410	0.8418	0.8426	0.8434	0.8441	0.8447
64	0.8392	0.8403	0.8414	0.8424	0.8434	0.8443	0.8452	0.8460	0.8468	0.8475
65	0.8413	0.8425	0.8436	0.8447	0.8458	0.8468	0.8477	0.8486	0.8494	0.8502
66	0.8433	0.8446	0.8458	0.8470	0.8481	0.8492	0.8502	0.8511	0.8520	0.8529
67	0.8453	0.8466	0.8479	0.8492	0.8504	0.8515	0.8526	0.8536	0.8546	0.8555
68	0.8472	0.8486	0.8500	0.8513	0.8526	0.8538	0.8550	0.8561	0.8571	0.8581
69	0.8490	0.8505	0.8519	0.8533	0.8547	0.8560	0.8573	0.8585	0.8596	0.8607
70	0.8508	0.8523	0.8538	0.8553	0.8567	0.8581	0.8595	0.8608	0.8620	0.8632
71	0.8524	0.8540	0.8556	0.8572	0.8587	0.8602	0.8616	0.8630	0.8643	0.8656
72	0.8540	0.8557	0.8573	0.8590	0.8606	0.8622	0.8637	0.8652	0.8666	0.8679
73	0.8554	0.8572	0.8590	0.8607	0.8624	0.8640	0.8656	0.8672	0.8687	0.8701
74	0.8568	0.8586	0.8605	0.8623	0.8641	0.8658	0.8675	0.8691	0.8707	0.8723

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
60	0.8369	0.8373	0.8376	0.8380	0.8382	0.8385	0.8387	0.8389	0.8391	0.8392
61	0.8397	0.8401	0.8405	0.8409	0.8412	0.8415	0.8417	0.8419	0.8421	0.8423
62	0.8425	0.8430	0.8434	0.8438	0.8442	0.8445	0.8448	0.8450	0.8452	0.8454
63	0.8453	0.8459	0.8464	0.8468	0.8472	0.8476	0.8479	0.8481	0.8484	0.8486
64	0.8481	0.8487	0.8493	0.8498	0.8502	0.8506	0.8510	0.8513	0.8515	0.8518
65	0.8509	0.8516	0.8522	0.8527	0.8532	0.8537	0.8541	0.8544	0.8547	0.8550
66	0.8537	0.8544	0.8551	0.8557	0.8562	0.8567	0.8572	0.8576	0.8579	0.8582
67	0.8564	0.8572	0.8579	0.8586	0.8592	0.8598	0.8603	0.8607	0.8611	0.8614
68	0.8591	0.8599	0.8608	0.8615	0.8622	0.8628	0.8633	0.8638	0.8643	0.8647
69	0.8617	0.8627	0.8635	0.8643	0.8651	0.8658	0.8664	0.8669	0.8674	0.8679
70	0.8643	0.8653	0.8663	0.8672	0.8680	0.8687	0.8694	0.8700	0.8706	0.8710
71	0.8668	0.8679	0.8689	0.8699	0.8708	0.8716	0.8724	0.8730	0.8737	0.8742
72	0.8692	0.8704	0.8715	0.8726	0.8735	0.8744	0.8753	0.8760	0.8767	0.8773
73	0.8715	0.8728	0.8740	0.8752	0.8762	0.8772	0.8781	0.8789	0.8797	0.8804
74	0.8737	0.8751	0.8764	0.8777	0.8788	0.8799	0.8809	0.8818	0.8826	0.8834

Age	80	81	82	83	84	85	86	87	88	89
60	0.8393	0.8394	0.8395	0.8395	0.8396	0.8396	0.8397	0.8397	0.8397	0.8397
61	0.8424	0.8425	0.8426	0.8427	0.8427	0.8428	0.8428	0.8429	0.8429	0.8429
62	0.8456	0.8457	0.8458	0.8459	0.8460	0.8460	0.8461	0.8461	0.8461	0.8461
63	0.8488	0.8489	0.8490	0.8491	0.8492	0.8493	0.8493	0.8494	0.8494	0.8494
64	0.8520	0.8521	0.8523	0.8524	0.8525	0.8526	0.8526	0.8527	0.8527	0.8528
65	0.8552	0.8554	0.8556	0.8557	0.8558	0.8559	0.8560	0.8561	0.8561	0.8561
66	0.8585	0.8587	0.8589	0.8590	0.8592	0.8593	0.8594	0.8594	0.8595	0.8595
67	0.8617	0.8620	0.8622	0.8624	0.8625	0.8627	0.8628	0.8629	0.8629	0.8630
68	0.8650	0.8653	0.8655	0.8658	0.8659	0.8661	0.8662	0.8663	0.8664	0.8664
69	0.8682	0.8686	0.8689	0.8691	0.8693	0.8695	0.8696	0.8698	0.8699	0.8699
70	0.8715	0.8719	0.8722	0.8725	0.8727	0.8729	0.8731	0.8732	0.8733	0.8734
71	0.8747	0.8751	0.8755	0.8758	0.8761	0.8763	0.8765	0.8767	0.8768	0.8769
72	0.8778	0.8783	0.8787	0.8791	0.8794	0.8797	0.8799	0.8801	0.8803	0.8804
73	0.8810	0.8815	0.8820	0.8824	0.8827	0.8831	0.8833	0.8835	0.8837	0.8839
74	0.8840	0.8846	0.8852	0.8856	0.8860	0.8864	0.8867	0.8869	0.8872	0.8873

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.8119	0.8129	0.8140	0.8151	0.8162	0.8173	0.8185	0.8197	0.8210	0.8223
76	0.8121	0.8131	0.8141	0.8152	0.8164	0.8175	0.8187	0.8200	0.8213	0.8226
77	0.8121	0.8132	0.8142	0.8153	0.8165	0.8177	0.8189	0.8202	0.8215	0.8228
78	0.8121	0.8132	0.8142	0.8154	0.8165	0.8177	0.8190	0.8202	0.8216	0.8229
79	0.8120	0.8131	0.8142	0.8153	0.8165	0.8177	0.8189	0.8202	0.8216	0.8230
80	0.8118	0.8129	0.8140	0.8152	0.8164	0.8176	0.8189	0.8202	0.8215	0.8230
81	0.8116	0.8127	0.8138	0.8150	0.8162	0.8174	0.8187	0.8200	0.8214	0.8229
82	0.8113	0.8124	0.8135	0.8147	0.8159	0.8172	0.8185	0.8198	0.8212	0.8227
83	0.8109	0.8120	0.8132	0.8144	0.8156	0.8169	0.8182	0.8196	0.8210	0.8224
84	0.8105	0.8116	0.8128	0.8140	0.8152	0.8165	0.8178	0.8192	0.8206	0.8221
85	0.8100	0.8111	0.8123	0.8135	0.8148	0.8161	0.8174	0.8188	0.8203	0.8218
86	0.8094	0.8106	0.8117	0.8130	0.8142	0.8156	0.8169	0.8183	0.8198	0.8213
87	0.8088	0.8100	0.8111	0.8124	0.8137	0.8150	0.8164	0.8178	0.8193	0.8208
88	0.8081	0.8093	0.8105	0.8117	0.8130	0.8144	0.8158	0.8172	0.8187	0.8202
89	0.8074	0.8085	0.8098	0.8110	0.8123	0.8137	0.8151	0.8165	0.8180	0.8196

Age	40	41	42	43	44	45	46	47	48	49
75	0.8237	0.8251	0.8265	0.8280	0.8295	0.8310	0.8326	0.8343	0.8359	0.8376
76	0.8240	0.8254	0.8269	0.8284	0.8299	0.8315	0.8331	0.8348	0.8365	0.8382
77	0.8242	0.8257	0.8271	0.8287	0.8302	0.8318	0.8335	0.8352	0.8369	0.8387
78	0.8244	0.8258	0.8273	0.8289	0.8305	0.8321	0.8338	0.8355	0.8373	0.8391
79	0.8244	0.8259	0.8274	0.8290	0.8306	0.8323	0.8340	0.8358	0.8375	0.8394
80	0.8244	0.8259	0.8275	0.8291	0.8307	0.8324	0.8341	0.8359	0.8377	0.8396
81	0.8243	0.8259	0.8274	0.8290	0.8307	0.8324	0.8342	0.8360	0.8378	0.8397
82	0.8242	0.8257	0.8273	0.8289	0.8306	0.8324	0.8342	0.8360	0.8379	0.8398
83	0.8239	0.8255	0.8271	0.8288	0.8305	0.8323	0.8341	0.8359	0.8378	0.8398
84	0.8237	0.8252	0.8269	0.8285	0.8303	0.8321	0.8339	0.8358	0.8377	0.8397
85	0.8233	0.8249	0.8266	0.8282	0.8300	0.8318	0.8337	0.8356	0.8375	0.8395
86	0.8229	0.8245	0.8262	0.8279	0.8297	0.8315	0.8333	0.8353	0.8373	0.8393
87	0.8224	0.8240	0.8257	0.8274	0.8292	0.8311	0.8330	0.8349	0.8369	0.8390
88	0.8218	0.8235	0.8252	0.8269	0.8287	0.8306	0.8325	0.8345	0.8365	0.8386
89	0.8212	0.8229	0.8246	0.8264	0.8282	0.8301	0.8320	0.8340	0.8360	0.8381

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
75	0.8394	0.8411	0.8429	0.8447	0.8466	0.8485	0.8504	0.8523	0.8542	0.8561
76	0.8400	0.8418	0.8436	0.8455	0.8474	0.8493	0.8513	0.8532	0.8552	0.8572
77	0.8405	0.8423	0.8442	0.8461	0.8481	0.8500	0.8520	0.8541	0.8561	0.8582
78	0.8409	0.8428	0.8447	0.8467	0.8487	0.8507	0.8527	0.8548	0.8569	0.8590
79	0.8413	0.8432	0.8451	0.8471	0.8492	0.8512	0.8533	0.8555	0.8576	0.8598
80	0.8415	0.8435	0.8455	0.8475	0.8496	0.8517	0.8538	0.8560	0.8582	0.8604
81	0.8417	0.8437	0.8457	0.8478	0.8499	0.8520	0.8542	0.8564	0.8587	0.8610
82	0.8418	0.8438	0.8458	0.8480	0.8501	0.8523	0.8545	0.8568	0.8591	0.8614
83	0.8418	0.8438	0.8459	0.8481	0.8502	0.8525	0.8548	0.8571	0.8594	0.8618
84	0.8417	0.8438	0.8459	0.8481	0.8503	0.8526	0.8549	0.8573	0.8596	0.8621
85	0.8416	0.8437	0.8458	0.8480	0.8503	0.8526	0.8550	0.8574	0.8598	0.8623
86	0.8414	0.8435	0.8457	0.8479	0.8502	0.8525	0.8549	0.8574	0.8598	0.8624
87	0.8411	0.8432	0.8455	0.8477	0.8500	0.8524	0.8548	0.8573	0.8598	0.8624
88	0.8407	0.8429	0.8451	0.8474	0.8498	0.8522	0.8546	0.8571	0.8597	0.8623
89	0.8403	0.8425	0.8448	0.8471	0.8495	0.8519	0.8544	0.8569	0.8595	0.8621

Age	60	61	62	63	64	65	66	67	68	69
75	0.8580	0.8600	0.8619	0.8638	0.8656	0.8675	0.8692	0.8710	0.8727	0.8743
76	0.8592	0.8612	0.8632	0.8651	0.8671	0.8690	0.8709	0.8727	0.8745	0.8762
77	0.8602	0.8623	0.8643	0.8664	0.8684	0.8704	0.8724	0.8743	0.8762	0.8780
78	0.8611	0.8633	0.8654	0.8675	0.8696	0.8717	0.8738	0.8758	0.8777	0.8796
79	0.8620	0.8642	0.8664	0.8686	0.8707	0.8729	0.8750	0.8771	0.8792	0.8812
80	0.8627	0.8649	0.8672	0.8695	0.8717	0.8740	0.8762	0.8784	0.8805	0.8826
81	0.8633	0.8656	0.8679	0.8703	0.8726	0.8749	0.8772	0.8795	0.8817	0.8839
82	0.8638	0.8662	0.8686	0.8710	0.8734	0.8758	0.8781	0.8805	0.8828	0.8851
83	0.8642	0.8666	0.8691	0.8716	0.8740	0.8765	0.8789	0.8814	0.8837	0.8861
84	0.8645	0.8670	0.8695	0.8721	0.8746	0.8771	0.8796	0.8821	0.8846	0.8870
85	0.8648	0.8673	0.8699	0.8724	0.8750	0.8776	0.8802	0.8828	0.8853	0.8879
86	0.8649	0.8675	0.8701	0.8727	0.8754	0.8780	0.8807	0.8833	0.8860	0.8886
87	0.8650	0.8676	0.8703	0.8729	0.8756	0.8784	0.8811	0.8838	0.8865	0.8891
88	0.8649	0.8676	0.8703	0.8731	0.8758	0.8786	0.8813	0.8841	0.8869	0.8896
89	0.8648	0.8675	0.8703	0.8731	0.8759	0.8787	0.8815	0.8843	0.8872	0.8900

Table 4b - NDPERS (Judges and Highway Patrol) - Healthy Lives
50% Joint & Survivor with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.8758	0.8773	0.8787	0.8801	0.8813	0.8825	0.8836	0.8845	0.8854	0.8863
76	0.8778	0.8794	0.8809	0.8824	0.8837	0.8850	0.8861	0.8872	0.8882	0.8891
77	0.8797	0.8814	0.8830	0.8845	0.8860	0.8873	0.8886	0.8898	0.8908	0.8918
78	0.8815	0.8833	0.8850	0.8866	0.8881	0.8896	0.8909	0.8922	0.8934	0.8945
79	0.8831	0.8850	0.8868	0.8885	0.8902	0.8917	0.8932	0.8945	0.8958	0.8970
80	0.8846	0.8866	0.8885	0.8903	0.8921	0.8937	0.8953	0.8968	0.8981	0.8994
81	0.8860	0.8881	0.8901	0.8920	0.8939	0.8956	0.8973	0.8988	0.9003	0.9017
82	0.8873	0.8894	0.8915	0.8936	0.8955	0.8974	0.8991	0.9008	0.9024	0.9038
83	0.8884	0.8907	0.8929	0.8950	0.8970	0.8990	0.9009	0.9026	0.9043	0.9059
84	0.8894	0.8918	0.8941	0.8963	0.8984	0.9005	0.9025	0.9043	0.9061	0.9078
85	0.8903	0.8928	0.8951	0.8975	0.8997	0.9019	0.9039	0.9059	0.9078	0.9095
86	0.8911	0.8936	0.8961	0.8985	0.9008	0.9031	0.9053	0.9073	0.9093	0.9112
87	0.8918	0.8944	0.8969	0.8994	0.9019	0.9042	0.9065	0.9087	0.9107	0.9127
88	0.8923	0.8950	0.8976	0.9002	0.9027	0.9052	0.9076	0.9098	0.9120	0.9141
89	0.8928	0.8955	0.8982	0.9009	0.9035	0.9060	0.9085	0.9109	0.9132	0.9153

Age	80	81	82	83	84	85	86	87	88	89
75	0.8870	0.8877	0.8883	0.8888	0.8893	0.8897	0.8900	0.8903	0.8906	0.8908
76	0.8899	0.8907	0.8913	0.8919	0.8924	0.8929	0.8933	0.8936	0.8939	0.8941
77	0.8927	0.8935	0.8943	0.8949	0.8955	0.8960	0.8965	0.8969	0.8972	0.8975
78	0.8954	0.8963	0.8971	0.8979	0.8985	0.8991	0.8996	0.9000	0.9004	0.9007
79	0.8981	0.8990	0.8999	0.9007	0.9014	0.9021	0.9027	0.9031	0.9036	0.9040
80	0.9005	0.9016	0.9026	0.9035	0.9043	0.9050	0.9056	0.9062	0.9067	0.9071
81	0.9029	0.9041	0.9051	0.9061	0.9070	0.9078	0.9085	0.9091	0.9097	0.9101
82	0.9052	0.9064	0.9076	0.9086	0.9096	0.9105	0.9112	0.9119	0.9126	0.9131
83	0.9073	0.9087	0.9099	0.9111	0.9121	0.9131	0.9139	0.9147	0.9154	0.9160
84	0.9093	0.9108	0.9121	0.9134	0.9145	0.9155	0.9165	0.9173	0.9181	0.9188
85	0.9112	0.9128	0.9142	0.9155	0.9168	0.9179	0.9189	0.9199	0.9207	0.9215
86	0.9130	0.9146	0.9162	0.9176	0.9189	0.9202	0.9213	0.9223	0.9232	0.9241
87	0.9146	0.9163	0.9180	0.9195	0.9210	0.9223	0.9235	0.9246	0.9256	0.9265
88	0.9161	0.9179	0.9197	0.9213	0.9229	0.9243	0.9256	0.9268	0.9279	0.9289
89	0.9174	0.9194	0.9212	0.9230	0.9246	0.9262	0.9276	0.9289	0.9301	0.9312

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	50% Joint and Survivor Annuity

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.8801	0.8804	0.8806	0.8808	0.8810	0.8813	0.8815	0.8817	0.8819	0.8821
31	0.8804	0.8806	0.8809	0.8811	0.8813	0.8816	0.8818	0.8820	0.8822	0.8824
32	0.8806	0.8809	0.8811	0.8814	0.8816	0.8819	0.8821	0.8824	0.8826	0.8828
33	0.8808	0.8811	0.8814	0.8817	0.8819	0.8822	0.8825	0.8827	0.8830	0.8832
34	0.8810	0.8813	0.8816	0.8819	0.8822	0.8825	0.8828	0.8831	0.8833	0.8836
35	0.8813	0.8816	0.8819	0.8822	0.8825	0.8828	0.8831	0.8834	0.8837	0.8840
36	0.8815	0.8818	0.8821	0.8825	0.8828	0.8831	0.8834	0.8837	0.8840	0.8843
37	0.8817	0.8820	0.8824	0.8827	0.8831	0.8834	0.8837	0.8841	0.8844	0.8847
38	0.8819	0.8822	0.8826	0.8830	0.8833	0.8837	0.8840	0.8844	0.8847	0.8851
39	0.8821	0.8824	0.8828	0.8832	0.8836	0.8840	0.8843	0.8847	0.8851	0.8855
40	0.8823	0.8827	0.8830	0.8834	0.8838	0.8842	0.8846	0.8850	0.8854	0.8858
41	0.8824	0.8828	0.8833	0.8837	0.8841	0.8845	0.8849	0.8853	0.8858	0.8862
42	0.8826	0.8830	0.8835	0.8839	0.8843	0.8848	0.8852	0.8856	0.8861	0.8865
43	0.8828	0.8832	0.8837	0.8841	0.8846	0.8850	0.8855	0.8859	0.8864	0.8868
44	0.8829	0.8834	0.8838	0.8843	0.8848	0.8853	0.8857	0.8862	0.8867	0.8872

Age	40	41	42	43	44	45	46	47	48	49
30	0.8822	0.8824	0.8826	0.8828	0.8829	0.8831	0.8832	0.8833	0.8835	0.8836
31	0.8826	0.8828	0.8830	0.8832	0.8834	0.8835	0.8837	0.8838	0.8840	0.8841
32	0.8830	0.8832	0.8834	0.8836	0.8838	0.8840	0.8842	0.8843	0.8845	0.8846
33	0.8834	0.8837	0.8839	0.8841	0.8843	0.8845	0.8847	0.8848	0.8850	0.8852
34	0.8838	0.8841	0.8843	0.8845	0.8848	0.8850	0.8852	0.8854	0.8855	0.8857
35	0.8842	0.8845	0.8848	0.8850	0.8852	0.8855	0.8857	0.8859	0.8861	0.8863
36	0.8846	0.8849	0.8852	0.8855	0.8857	0.8860	0.8862	0.8864	0.8866	0.8868
37	0.8850	0.8853	0.8856	0.8859	0.8862	0.8865	0.8867	0.8870	0.8872	0.8874
38	0.8854	0.8857	0.8861	0.8864	0.8867	0.8870	0.8872	0.8875	0.8878	0.8880
39	0.8858	0.8862	0.8865	0.8868	0.8872	0.8875	0.8878	0.8881	0.8883	0.8886
40	0.8862	0.8866	0.8869	0.8873	0.8876	0.8880	0.8883	0.8886	0.8889	0.8892
41	0.8866	0.8870	0.8873	0.8877	0.8881	0.8885	0.8888	0.8891	0.8895	0.8898
42	0.8869	0.8874	0.8878	0.8882	0.8886	0.8890	0.8893	0.8897	0.8900	0.8904
43	0.8873	0.8877	0.8882	0.8886	0.8890	0.8894	0.8898	0.8902	0.8906	0.8910
44	0.8876	0.8881	0.8886	0.8890	0.8895	0.8899	0.8903	0.8908	0.8912	0.8916

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.8837	0.8838	0.8839	0.8840	0.8841	0.8841	0.8842	0.8843	0.8843	0.8844
31	0.8842	0.8843	0.8844	0.8845	0.8846	0.8847	0.8848	0.8849	0.8849	0.8850
32	0.8847	0.8849	0.8850	0.8851	0.8852	0.8853	0.8854	0.8855	0.8856	0.8856
33	0.8853	0.8854	0.8856	0.8857	0.8858	0.8859	0.8860	0.8861	0.8862	0.8863
34	0.8859	0.8860	0.8862	0.8863	0.8864	0.8865	0.8867	0.8868	0.8868	0.8869
35	0.8864	0.8866	0.8868	0.8869	0.8871	0.8872	0.8873	0.8874	0.8875	0.8876
36	0.8870	0.8872	0.8874	0.8876	0.8877	0.8878	0.8880	0.8881	0.8882	0.8883
37	0.8876	0.8878	0.8880	0.8882	0.8884	0.8885	0.8887	0.8888	0.8889	0.8890
38	0.8882	0.8885	0.8887	0.8889	0.8890	0.8892	0.8894	0.8895	0.8897	0.8898
39	0.8888	0.8891	0.8893	0.8895	0.8897	0.8899	0.8901	0.8903	0.8904	0.8906
40	0.8895	0.8897	0.8900	0.8902	0.8904	0.8906	0.8908	0.8910	0.8912	0.8913
41	0.8901	0.8904	0.8906	0.8909	0.8911	0.8914	0.8916	0.8918	0.8920	0.8921
42	0.8907	0.8910	0.8913	0.8916	0.8918	0.8921	0.8923	0.8926	0.8928	0.8929
43	0.8913	0.8917	0.8920	0.8923	0.8926	0.8928	0.8931	0.8933	0.8936	0.8938
44	0.8919	0.8923	0.8926	0.8930	0.8933	0.8936	0.8939	0.8941	0.8944	0.8946

Age	60	61	62	63	64	65	66	67	68	69
30	0.8845	0.8845	0.8846	0.8846	0.8846	0.8847	0.8847	0.8847	0.8848	0.8848
31	0.8851	0.8851	0.8852	0.8852	0.8853	0.8853	0.8853	0.8854	0.8854	0.8854
32	0.8857	0.8858	0.8858	0.8859	0.8859	0.8860	0.8860	0.8860	0.8861	0.8861
33	0.8863	0.8864	0.8865	0.8865	0.8866	0.8866	0.8867	0.8867	0.8867	0.8868
34	0.8870	0.8871	0.8872	0.8872	0.8873	0.8873	0.8874	0.8874	0.8875	0.8875
35	0.8877	0.8878	0.8879	0.8879	0.8880	0.8881	0.8881	0.8882	0.8882	0.8882
36	0.8884	0.8885	0.8886	0.8887	0.8887	0.8888	0.8889	0.8889	0.8890	0.8890
37	0.8892	0.8893	0.8894	0.8894	0.8895	0.8896	0.8896	0.8897	0.8898	0.8898
38	0.8899	0.8900	0.8901	0.8902	0.8903	0.8904	0.8905	0.8905	0.8906	0.8906
39	0.8907	0.8908	0.8909	0.8910	0.8911	0.8912	0.8913	0.8914	0.8914	0.8915
40	0.8915	0.8916	0.8917	0.8919	0.8920	0.8921	0.8921	0.8922	0.8923	0.8924
41	0.8923	0.8924	0.8926	0.8927	0.8928	0.8929	0.8930	0.8931	0.8932	0.8933
42	0.8931	0.8933	0.8934	0.8936	0.8937	0.8938	0.8939	0.8940	0.8941	0.8942
43	0.8940	0.8942	0.8943	0.8945	0.8946	0.8948	0.8949	0.8950	0.8951	0.8952
44	0.8948	0.8950	0.8952	0.8954	0.8956	0.8957	0.8958	0.8959	0.8961	0.8962

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.8848	0.8848	0.8848	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
31	0.8854	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855	0.8855
32	0.8861	0.8861	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8868	0.8868	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869	0.8869
34	0.8875	0.8876	0.8876	0.8876	0.8876	0.8876	0.8876	0.8877	0.8877	0.8877
35	0.8883	0.8883	0.8883	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884	0.8884
36	0.8890	0.8891	0.8891	0.8891	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892
37	0.8898	0.8899	0.8899	0.8899	0.8900	0.8900	0.8900	0.8900	0.8900	0.8900
38	0.8907	0.8907	0.8907	0.8908	0.8908	0.8908	0.8909	0.8909	0.8909	0.8909
39	0.8915	0.8916	0.8916	0.8917	0.8917	0.8917	0.8917	0.8917	0.8918	0.8918
40	0.8924	0.8925	0.8925	0.8926	0.8926	0.8926	0.8926	0.8927	0.8927	0.8927
41	0.8933	0.8934	0.8934	0.8935	0.8935	0.8935	0.8936	0.8936	0.8936	0.8936
42	0.8943	0.8943	0.8944	0.8944	0.8945	0.8945	0.8945	0.8946	0.8946	0.8946
43	0.8952	0.8953	0.8954	0.8954	0.8955	0.8955	0.8955	0.8956	0.8956	0.8956
44	0.8962	0.8963	0.8964	0.8964	0.8965	0.8965	0.8966	0.8966	0.8966	0.8967

Age	80	81	82	83	84	85	86	87	88	89
30	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849	0.8849
31	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856	0.8856
32	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862	0.8862
33	0.8869	0.8869	0.8869	0.8870	0.8870	0.8870	0.8870	0.8870	0.8870	0.8870
34	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877	0.8877
35	0.8884	0.8884	0.8884	0.8885	0.8885	0.8885	0.8885	0.8885	0.8885	0.8885
36	0.8892	0.8892	0.8892	0.8892	0.8892	0.8892	0.8893	0.8893	0.8893	0.8893
37	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901	0.8901
38	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909	0.8909
39	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918	0.8918
40	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927	0.8927
41	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937	0.8937
42	0.8946	0.8946	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947	0.8947
43	0.8956	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957	0.8957
44	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967	0.8967

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.8831	0.8835	0.8840	0.8845	0.8850	0.8855	0.8860	0.8865	0.8870	0.8875
46	0.8832	0.8837	0.8842	0.8847	0.8852	0.8857	0.8862	0.8867	0.8873	0.8878
47	0.8834	0.8838	0.8843	0.8849	0.8854	0.8859	0.8864	0.8870	0.8875	0.8881
48	0.8835	0.8840	0.8845	0.8850	0.8856	0.8861	0.8867	0.8872	0.8878	0.8884
49	0.8836	0.8841	0.8846	0.8852	0.8857	0.8863	0.8869	0.8874	0.8880	0.8886
50	0.8837	0.8842	0.8848	0.8853	0.8859	0.8865	0.8871	0.8877	0.8883	0.8889
51	0.8838	0.8844	0.8849	0.8855	0.8861	0.8866	0.8872	0.8879	0.8885	0.8891
52	0.8839	0.8845	0.8850	0.8856	0.8862	0.8868	0.8874	0.8881	0.8887	0.8893
53	0.8840	0.8846	0.8851	0.8857	0.8863	0.8870	0.8876	0.8882	0.8889	0.8896
54	0.8841	0.8847	0.8852	0.8858	0.8865	0.8871	0.8877	0.8884	0.8891	0.8898
55	0.8842	0.8848	0.8853	0.8860	0.8866	0.8872	0.8879	0.8886	0.8893	0.8900
56	0.8843	0.8848	0.8854	0.8861	0.8867	0.8874	0.8880	0.8887	0.8894	0.8901
57	0.8843	0.8849	0.8855	0.8862	0.8868	0.8875	0.8882	0.8889	0.8896	0.8903
58	0.8844	0.8850	0.8856	0.8862	0.8869	0.8876	0.8883	0.8890	0.8897	0.8905
59	0.8844	0.8851	0.8857	0.8863	0.8870	0.8877	0.8884	0.8891	0.8898	0.8906

Age	40	41	42	43	44	45	46	47	48	49
45	0.8880	0.8885	0.8890	0.8894	0.8899	0.8904	0.8908	0.8913	0.8917	0.8922
46	0.8883	0.8888	0.8893	0.8899	0.8904	0.8909	0.8913	0.8918	0.8923	0.8927
47	0.8886	0.8892	0.8897	0.8902	0.8908	0.8913	0.8918	0.8923	0.8928	0.8933
48	0.8889	0.8895	0.8901	0.8906	0.8912	0.8917	0.8923	0.8928	0.8934	0.8939
49	0.8892	0.8898	0.8904	0.8910	0.8916	0.8922	0.8927	0.8933	0.8939	0.8944
50	0.8895	0.8901	0.8907	0.8913	0.8920	0.8926	0.8932	0.8938	0.8944	0.8950
51	0.8898	0.8904	0.8910	0.8917	0.8923	0.8930	0.8936	0.8942	0.8949	0.8955
52	0.8900	0.8907	0.8913	0.8920	0.8927	0.8934	0.8940	0.8947	0.8953	0.8960
53	0.8902	0.8909	0.8916	0.8923	0.8930	0.8937	0.8944	0.8951	0.8958	0.8965
54	0.8905	0.8912	0.8919	0.8926	0.8933	0.8941	0.8948	0.8955	0.8962	0.8970
55	0.8907	0.8914	0.8921	0.8929	0.8936	0.8944	0.8952	0.8959	0.8967	0.8974
56	0.8909	0.8916	0.8924	0.8932	0.8939	0.8947	0.8955	0.8963	0.8971	0.8978
57	0.8911	0.8918	0.8926	0.8934	0.8942	0.8950	0.8958	0.8966	0.8974	0.8983
58	0.8912	0.8920	0.8928	0.8936	0.8945	0.8953	0.8961	0.8970	0.8978	0.8987
59	0.8914	0.8922	0.8930	0.8938	0.8947	0.8955	0.8964	0.8973	0.8981	0.8990

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.8926	0.8929	0.8933	0.8937	0.8940	0.8943	0.8947	0.8949	0.8952	0.8955
46	0.8932	0.8936	0.8940	0.8944	0.8948	0.8951	0.8954	0.8958	0.8961	0.8963
47	0.8938	0.8942	0.8947	0.8951	0.8955	0.8959	0.8962	0.8966	0.8969	0.8972
48	0.8944	0.8949	0.8953	0.8958	0.8962	0.8966	0.8970	0.8974	0.8977	0.8981
49	0.8950	0.8955	0.8960	0.8965	0.8969	0.8974	0.8978	0.8982	0.8986	0.8990
50	0.8955	0.8961	0.8966	0.8971	0.8976	0.8981	0.8986	0.8990	0.8994	0.8998
51	0.8961	0.8967	0.8972	0.8978	0.8983	0.8989	0.8994	0.8998	0.9003	0.9007
52	0.8966	0.8972	0.8979	0.8985	0.8990	0.8996	0.9001	0.9006	0.9011	0.9016
53	0.8972	0.8978	0.8985	0.8991	0.8997	0.9003	0.9009	0.9014	0.9020	0.9025
54	0.8977	0.8984	0.8990	0.8997	0.9004	0.9010	0.9016	0.9022	0.9028	0.9033
55	0.8982	0.8989	0.8996	0.9003	0.9010	0.9017	0.9023	0.9030	0.9036	0.9042
56	0.8986	0.8994	0.9001	0.9009	0.9016	0.9023	0.9030	0.9037	0.9044	0.9050
57	0.8991	0.8999	0.9007	0.9015	0.9022	0.9030	0.9037	0.9044	0.9051	0.9058
58	0.8995	0.9003	0.9012	0.9020	0.9028	0.9036	0.9044	0.9052	0.9059	0.9066
59	0.8999	0.9008	0.9016	0.9025	0.9034	0.9042	0.9050	0.9058	0.9066	0.9074

Age	60	61	62	63	64	65	66	67	68	69
45	0.8957	0.8959	0.8961	0.8963	0.8965	0.8967	0.8968	0.8969	0.8971	0.8972
46	0.8966	0.8968	0.8971	0.8973	0.8975	0.8976	0.8978	0.8980	0.8981	0.8982
47	0.8975	0.8978	0.8980	0.8982	0.8985	0.8986	0.8988	0.8990	0.8991	0.8993
48	0.8984	0.8987	0.8990	0.8992	0.8995	0.8997	0.8999	0.9000	0.9002	0.9004
49	0.8993	0.8996	0.8999	0.9002	0.9005	0.9007	0.9009	0.9011	0.9013	0.9015
50	0.9002	0.9006	0.9009	0.9012	0.9015	0.9018	0.9020	0.9022	0.9024	0.9026
51	0.9011	0.9015	0.9019	0.9022	0.9025	0.9028	0.9031	0.9033	0.9035	0.9037
52	0.9020	0.9025	0.9028	0.9032	0.9036	0.9039	0.9042	0.9044	0.9047	0.9049
53	0.9029	0.9034	0.9038	0.9042	0.9046	0.9050	0.9053	0.9056	0.9058	0.9061
54	0.9038	0.9043	0.9048	0.9052	0.9057	0.9060	0.9064	0.9067	0.9070	0.9073
55	0.9047	0.9053	0.9058	0.9062	0.9067	0.9071	0.9075	0.9079	0.9082	0.9085
56	0.9056	0.9062	0.9067	0.9073	0.9077	0.9082	0.9086	0.9090	0.9094	0.9097
57	0.9065	0.9071	0.9077	0.9082	0.9088	0.9093	0.9097	0.9102	0.9106	0.9109
58	0.9073	0.9080	0.9086	0.9092	0.9098	0.9103	0.9108	0.9113	0.9118	0.9122
59	0.9081	0.9088	0.9095	0.9102	0.9108	0.9114	0.9119	0.9125	0.9129	0.9134

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.8973	0.8973	0.8974	0.8975	0.8976	0.8976	0.8976	0.8977	0.8977	0.8977
46	0.8983	0.8984	0.8985	0.8986	0.8986	0.8987	0.8987	0.8988	0.8988	0.8988
47	0.8994	0.8995	0.8996	0.8997	0.8997	0.8998	0.8999	0.8999	0.9000	0.9000
48	0.9005	0.9006	0.9007	0.9008	0.9009	0.9010	0.9010	0.9011	0.9011	0.9012
49	0.9016	0.9017	0.9019	0.9020	0.9021	0.9021	0.9022	0.9023	0.9023	0.9024
50	0.9028	0.9029	0.9030	0.9032	0.9033	0.9033	0.9034	0.9035	0.9035	0.9036
51	0.9039	0.9041	0.9042	0.9044	0.9045	0.9046	0.9047	0.9047	0.9048	0.9049
52	0.9051	0.9053	0.9055	0.9056	0.9057	0.9058	0.9059	0.9060	0.9061	0.9062
53	0.9063	0.9065	0.9067	0.9069	0.9070	0.9071	0.9072	0.9073	0.9074	0.9075
54	0.9075	0.9078	0.9080	0.9082	0.9083	0.9085	0.9086	0.9087	0.9088	0.9089
55	0.9088	0.9090	0.9093	0.9095	0.9096	0.9098	0.9099	0.9101	0.9102	0.9103
56	0.9100	0.9103	0.9106	0.9108	0.9110	0.9112	0.9113	0.9115	0.9116	0.9117
57	0.9113	0.9116	0.9119	0.9121	0.9123	0.9125	0.9127	0.9129	0.9130	0.9131
58	0.9125	0.9129	0.9132	0.9135	0.9137	0.9139	0.9141	0.9143	0.9145	0.9146
59	0.9138	0.9142	0.9145	0.9148	0.9151	0.9153	0.9156	0.9158	0.9159	0.9161

Age	80	81	82	83	84	85	86	87	88	89
45	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978	0.8978
46	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8989	0.8990	0.8990
47	0.9000	0.9000	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001	0.9001
48	0.9012	0.9012	0.9012	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013	0.9013
49	0.9024	0.9024	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025	0.9025
50	0.9036	0.9037	0.9037	0.9037	0.9037	0.9038	0.9038	0.9038	0.9038	0.9038
51	0.9049	0.9049	0.9050	0.9050	0.9050	0.9050	0.9051	0.9051	0.9051	0.9051
52	0.9062	0.9063	0.9063	0.9063	0.9064	0.9064	0.9064	0.9064	0.9064	0.9064
53	0.9076	0.9076	0.9076	0.9077	0.9077	0.9077	0.9077	0.9078	0.9078	0.9078
54	0.9089	0.9090	0.9090	0.9091	0.9091	0.9091	0.9091	0.9092	0.9092	0.9092
55	0.9103	0.9104	0.9104	0.9105	0.9105	0.9106	0.9106	0.9106	0.9106	0.9106
56	0.9118	0.9118	0.9119	0.9119	0.9120	0.9120	0.9120	0.9121	0.9121	0.9121
57	0.9132	0.9133	0.9134	0.9134	0.9135	0.9135	0.9135	0.9136	0.9136	0.9136
58	0.9147	0.9148	0.9149	0.9149	0.9150	0.9150	0.9151	0.9151	0.9151	0.9151
59	0.9162	0.9163	0.9164	0.9165	0.9166	0.9166	0.9166	0.9167	0.9167	0.9167

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.8845	0.8851	0.8857	0.8864	0.8871	0.8878	0.8885	0.8892	0.8900	0.8908
61	0.8846	0.8852	0.8858	0.8865	0.8871	0.8878	0.8886	0.8893	0.8901	0.8909
62	0.8846	0.8852	0.8859	0.8865	0.8872	0.8879	0.8887	0.8894	0.8902	0.8910
63	0.8846	0.8853	0.8859	0.8866	0.8873	0.8880	0.8887	0.8895	0.8903	0.8911
64	0.8847	0.8853	0.8860	0.8866	0.8873	0.8881	0.8888	0.8896	0.8904	0.8912
65	0.8847	0.8853	0.8860	0.8867	0.8874	0.8881	0.8889	0.8896	0.8904	0.8913
66	0.8847	0.8854	0.8860	0.8867	0.8874	0.8882	0.8889	0.8897	0.8905	0.8914
67	0.8848	0.8854	0.8861	0.8868	0.8875	0.8882	0.8890	0.8898	0.8906	0.8914
68	0.8848	0.8854	0.8861	0.8868	0.8875	0.8883	0.8890	0.8898	0.8906	0.8915
69	0.8848	0.8855	0.8861	0.8868	0.8875	0.8883	0.8891	0.8899	0.8907	0.8915
70	0.8848	0.8855	0.8862	0.8869	0.8876	0.8883	0.8891	0.8899	0.8907	0.8916
71	0.8849	0.8855	0.8862	0.8869	0.8876	0.8884	0.8891	0.8899	0.8908	0.8916
72	0.8849	0.8855	0.8862	0.8869	0.8876	0.8884	0.8892	0.8900	0.8908	0.8917
73	0.8849	0.8855	0.8862	0.8869	0.8876	0.8884	0.8892	0.8900	0.8908	0.8917
74	0.8849	0.8856	0.8862	0.8869	0.8877	0.8884	0.8892	0.8900	0.8909	0.8917

Age	40	41	42	43	44	45	46	47	48	49
60	0.8915	0.8924	0.8932	0.8940	0.8949	0.8958	0.8967	0.8976	0.8985	0.8994
61	0.8917	0.8925	0.8934	0.8942	0.8951	0.8960	0.8969	0.8978	0.8988	0.8997
62	0.8918	0.8927	0.8935	0.8944	0.8953	0.8962	0.8972	0.8981	0.8990	0.9000
63	0.8919	0.8928	0.8937	0.8946	0.8955	0.8964	0.8974	0.8983	0.8993	0.9003
64	0.8920	0.8929	0.8938	0.8947	0.8956	0.8966	0.8976	0.8985	0.8995	0.9006
65	0.8921	0.8930	0.8939	0.8948	0.8958	0.8968	0.8977	0.8987	0.8998	0.9008
66	0.8922	0.8931	0.8940	0.8950	0.8959	0.8969	0.8979	0.8989	0.9000	0.9010
67	0.8923	0.8932	0.8941	0.8951	0.8960	0.8970	0.8981	0.8991	0.9002	0.9012
68	0.8924	0.8933	0.8942	0.8952	0.8961	0.8972	0.8982	0.8992	0.9003	0.9014
69	0.8924	0.8933	0.8943	0.8953	0.8962	0.8973	0.8983	0.8994	0.9005	0.9016
70	0.8925	0.8934	0.8944	0.8953	0.8963	0.8974	0.8984	0.8995	0.9006	0.9017
71	0.8925	0.8935	0.8944	0.8954	0.8964	0.8975	0.8985	0.8996	0.9007	0.9019
72	0.8926	0.8935	0.8945	0.8955	0.8965	0.8975	0.8986	0.8997	0.9008	0.9020
73	0.8926	0.8936	0.8945	0.8955	0.8965	0.8976	0.8987	0.8998	0.9009	0.9021
74	0.8927	0.8936	0.8946	0.8956	0.8966	0.8977	0.8987	0.8999	0.9010	0.9022

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.9003	0.9012	0.9021	0.9030	0.9039	0.9048	0.9056	0.9065	0.9073	0.9081
61	0.9006	0.9016	0.9025	0.9035	0.9044	0.9053	0.9062	0.9071	0.9080	0.9089
62	0.9010	0.9020	0.9029	0.9039	0.9049	0.9058	0.9068	0.9077	0.9087	0.9096
63	0.9013	0.9023	0.9033	0.9043	0.9053	0.9063	0.9073	0.9083	0.9093	0.9102
64	0.9016	0.9026	0.9037	0.9047	0.9057	0.9068	0.9078	0.9088	0.9099	0.9109
65	0.9019	0.9029	0.9040	0.9051	0.9061	0.9072	0.9083	0.9093	0.9104	0.9114
66	0.9021	0.9032	0.9043	0.9054	0.9065	0.9076	0.9087	0.9098	0.9109	0.9120
67	0.9023	0.9034	0.9046	0.9057	0.9068	0.9080	0.9091	0.9103	0.9114	0.9125
68	0.9025	0.9037	0.9048	0.9060	0.9071	0.9083	0.9095	0.9107	0.9119	0.9130
69	0.9027	0.9039	0.9050	0.9062	0.9074	0.9086	0.9098	0.9111	0.9123	0.9135
70	0.9029	0.9041	0.9052	0.9065	0.9077	0.9089	0.9101	0.9114	0.9126	0.9139
71	0.9030	0.9042	0.9054	0.9067	0.9079	0.9092	0.9104	0.9117	0.9130	0.9143
72	0.9032	0.9044	0.9056	0.9068	0.9081	0.9094	0.9107	0.9120	0.9133	0.9146
73	0.9033	0.9045	0.9057	0.9070	0.9083	0.9096	0.9109	0.9123	0.9136	0.9150
74	0.9034	0.9046	0.9059	0.9072	0.9085	0.9098	0.9111	0.9125	0.9139	0.9152

Age	60	61	62	63	64	65	66	67	68	69
60	0.9089	0.9097	0.9104	0.9111	0.9118	0.9124	0.9130	0.9136	0.9141	0.9146
61	0.9097	0.9105	0.9113	0.9120	0.9128	0.9134	0.9141	0.9147	0.9153	0.9158
62	0.9104	0.9113	0.9121	0.9129	0.9137	0.9144	0.9151	0.9158	0.9164	0.9170
63	0.9112	0.9121	0.9129	0.9138	0.9146	0.9154	0.9162	0.9169	0.9175	0.9182
64	0.9118	0.9128	0.9137	0.9146	0.9155	0.9163	0.9171	0.9179	0.9186	0.9193
65	0.9125	0.9135	0.9145	0.9154	0.9164	0.9172	0.9181	0.9189	0.9197	0.9204
66	0.9131	0.9141	0.9152	0.9162	0.9172	0.9181	0.9190	0.9199	0.9207	0.9215
67	0.9137	0.9148	0.9158	0.9169	0.9179	0.9189	0.9199	0.9208	0.9217	0.9226
68	0.9142	0.9153	0.9165	0.9176	0.9187	0.9197	0.9207	0.9217	0.9227	0.9236
69	0.9147	0.9159	0.9171	0.9182	0.9194	0.9205	0.9215	0.9226	0.9236	0.9245
70	0.9152	0.9164	0.9176	0.9188	0.9200	0.9212	0.9223	0.9234	0.9244	0.9255
71	0.9156	0.9169	0.9181	0.9194	0.9206	0.9218	0.9230	0.9242	0.9253	0.9263
72	0.9160	0.9173	0.9186	0.9199	0.9212	0.9224	0.9237	0.9249	0.9260	0.9272
73	0.9163	0.9177	0.9190	0.9204	0.9217	0.9230	0.9243	0.9255	0.9268	0.9279
74	0.9166	0.9180	0.9194	0.9208	0.9222	0.9235	0.9249	0.9262	0.9274	0.9287

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
60	0.9150	0.9155	0.9158	0.9162	0.9165	0.9168	0.9170	0.9172	0.9174	0.9176
61	0.9163	0.9167	0.9172	0.9175	0.9179	0.9182	0.9185	0.9187	0.9189	0.9191
62	0.9175	0.9180	0.9185	0.9189	0.9193	0.9196	0.9199	0.9202	0.9204	0.9206
63	0.9187	0.9193	0.9198	0.9202	0.9207	0.9210	0.9214	0.9217	0.9220	0.9222
64	0.9199	0.9205	0.9211	0.9216	0.9220	0.9225	0.9228	0.9232	0.9235	0.9237
65	0.9211	0.9217	0.9223	0.9229	0.9234	0.9239	0.9243	0.9246	0.9250	0.9253
66	0.9222	0.9229	0.9236	0.9242	0.9247	0.9252	0.9257	0.9261	0.9265	0.9268
67	0.9233	0.9241	0.9248	0.9254	0.9260	0.9266	0.9271	0.9276	0.9280	0.9283
68	0.9244	0.9252	0.9260	0.9267	0.9273	0.9279	0.9285	0.9290	0.9294	0.9299
69	0.9254	0.9263	0.9271	0.9279	0.9286	0.9292	0.9298	0.9304	0.9309	0.9313
70	0.9264	0.9273	0.9282	0.9290	0.9298	0.9305	0.9311	0.9318	0.9323	0.9328
71	0.9274	0.9283	0.9293	0.9301	0.9309	0.9317	0.9324	0.9331	0.9337	0.9342
72	0.9282	0.9293	0.9303	0.9312	0.9321	0.9329	0.9337	0.9344	0.9350	0.9356
73	0.9291	0.9302	0.9312	0.9322	0.9331	0.9340	0 9348	0.9356	0.9363	0.9370
74	0.9299	0.9310	0.9321	0.9332	0.9342	0.9351	0.9360	0.9368	0.9376	0.9383

Age	80	81	82	83	84	85	86	87	88	89
60	0.9177	0.9179	0.9180	0.9181	0.9181	0.9182	0.9182	0.9183	0.9183	0.9183
61	0.9193	0.9194	0.9195	0.9196	0.9197	0.9198	0.9199	0.9199	0.9199	0.9200
62	0.9208	0.9210	0.9211	0.9213	0.9214	0.9214	0.9215	0.9216	0.9216	0.9216
63	0.9224	0.9226	0.9227	0.9229	0.9230	0.9231	0.9232	0.9232	0.9233	0.9233
64	0.9240	0.9242	0.9244	0.9245	0.9246	0.9248	0.9248	0.9249	0.9250	0.9250
65	0.9255	0.9258	0.9260	0.9262	0.9263	0.9264	0.9265	0.9266	0.9267	0.9268
66	0.9271	0.9274	0.9276	0.9278	0.9280	0.9281	0.9282	0.9283	0.9284	0.9285
67	0.9287	0.9290	0.9292	0.9294	0.9296	0.9298	0.9299	0.9301	0.9302	0.9302
68	0.9302	0.9305	0.9308	0.9311	0.9313	0.9315	0.9317	0.9318	0.9319	0.9320
69	0.9317	0.9321	0.9324	0.9327	0.9330	0.9332	0.9334	0.9335	0.9336	0.9338
70	0.9332	0.9337	0.9340	0.9343	0.9346	0.9348	0.9351	0.9352	0.9354	0.9355
71	0.9347	0.9352	0.9356	0.9359	0.9362	0.9365	0.9367	0.9369	0.9371	0.9373
72	0.9362	0.9366	0.9371	0.9375	0.9378	0.9381	0.9384	0.9386	0.9388	0.9390
73	0.9376	0.9381	0.9386	0.9390	0.9394	0.9397	0.9400	0.9403	0.9405	0.9407
74	0.9389	0.9395	0.9400	0.9405	0.9409	0.9413	0.9416	0.9419	0.9422	0.9424

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.8849	0.8856	0.8862	0.8869	0.8877	0.8884	0.8892	0.8900	0.8909	0.8918
76	0.8849	0.8856	0.8862	0.8870	0.8877	0.8885	0.8892	0.8901	0.8909	0.8918
77	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8909	0.8918
78	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8909	0.8918
79	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8918
80	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8918
81	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
82	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
83	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
84	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
85	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
86	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
87	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
88	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919
89	0.8849	0.8856	0.8863	0.8870	0.8877	0.8885	0.8893	0.8901	0.8910	0.8919

Age	40	41	42	43	44	45	46	47	48	49
75	0.8927	0.8936	0.8946	0.8956	0.8966	0.8977	0.8988	0.8999	0.9011	0.9023
76	0.8927	0.8937	0.8946	0.8956	0.8967	0.8977	0.8988	0.9000	0.9011	0.9023
77	0.8927	0.8937	0.8947	0.8957	0.8967	0.8978	0.8989	0.9000	0.9012	0.9024
78	0.8927	0.8937	0.8947	0.8957	0.8967	0.8978	0.8989	0.9001	0.9012	0.9024
79	0.8928	0.8937	0.8947	0.8957	0.8968	0.8978	0.8990	0.9001	0.9013	0.9025
80	0.8928	0.8937	0.8947	0.8957	0.8968	0.8979	0.8990	0.9001	0.9013	0.9025
81	0.8928	0.8937	0.8947	0.8957	0.8968	0.8979	0.8990	0.9001	0.9013	0.9026
82	0.8928	0.8937	0.8947	0.8957	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
83	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
84	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
85	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
86	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
87	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
88	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026
89	0.8928	0.8937	0.8947	0.8958	0.8968	0.8979	0.8990	0.9002	0.9014	0.9026

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
75	0.9035	0.9047	0.9060	0.9073	0.9086	0.9099	0.9113	0.9127	0.9141	0.9155
76	0.9036	0.9048	0.9061	0.9074	0.9087	0.9101	0.9115	0.9129	0.9143	0.9157
77	0.9036	0.9049	0.9062	0.9075	0.9088	0.9102	0.9116	0.9130	0.9145	0.9159
78	0.9037	0.9050	0.9063	0.9076	0.9089	0.9103	0.9117	0.9132	0.9146	0.9161
79	0.9037	0.9050	0.9063	0.9077	0.9090	0.9104	0.9118	0.9133	0.9148	0.9163
80	0.9038	0.9051	0.9064	0.9077	0.9091	0.9105	0.9119	0.9134	0.9149	0.9164
81	0.9038	0.9051	0.9064	0.9078	0.9091	0.9106	0.9120	0.9135	0.9150	0.9165
82	0.9038	0.9051	0.9064	0.9078	0.9092	0.9106	0.9121	0.9135	0.9151	0.9166
83	0.9038	0.9051	0.9065	0.9078	0.9092	0.9107	0.9121	0.9136	0.9151	0.9167
84	0.9039	0.9052	0.9065	0.9079	0.9093	0.9107	0.9122	0.9137	0.9152	0.9167
85	0.9039	0.9052	0.9065	0.9079	0.9093	0.9107	0.9122	0.9137	0.9152	0.9168
86	0.9039	0.9052	0.9065	0.9079	0.9093	0.9107	0.9122	0.9137	0.9153	0.9168
87	0.9039	0.9052	0.9065	0.9079	0.9093	0.9107	0.9122	0.9137	0.9153	0.9169
88	0.9039	0.9052	0.9065	0.9079	0.9093	0.9108	0.9122	0.9138	0.9153	0.9169
89	0.9039	0.9052	0.9065	0.9079	0.9093	0.9108	0.9122	0.9138	0.9153	0.9169

Age	60	61	62	63	64	65	66	67	68	69
75	0.9169	0.9183	0.9198	0.9212	0.9226	0.9240	0.9254	0.9267	0.9281	0.9293
76	0.9172	0.9186	0.9201	0.9215	0.9230	0.9244	0.9259	0.9273	0.9286	0.9300
77	0.9174	0.9189	0.9204	0.9219	0.9233	0.9248	0.9263	0.9277	0.9291	0.9305
78	0.9176	0.9191	0.9206	0.9221	0.9237	0.9252	0.9267	0.9282	0.9296	0.9311
79	0.9178	0.9193	0.9208	0.9224	0.9239	0.9255	0.9270	0.9285	0.9300	0.9315
80	0.9179	0.9195	0.9210	0.9226	0.9242	0.9258	0.9273	0.9289	0.9304	0.9320
81	0.9181	0.9196	0.9212	0.9228	0.9244	0.9260	0.9276	0.9292	0.9308	0.9323
82	0.9182	0.9197	0.9213	0.9230	0.9246	0.9262	0.9278	0.9295	0.9311	0.9327
83	0.9183	0.9199	0.9215	0.9231	0.9247	0.9264	0.9281	0.9297	0.9313	0.9330
84	0.9183	0.9199	0.9216	0.9232	0.9249	0.9266	0.9282	0.9299	0.9316	0.9332
85	0.9184	0.9200	0.9217	0.9233	0.9250	0.9267	0.9284	0.9301	0.9318	0.9335
86	0.9184	0.9201	0.9217	0.9234	0.9251	0.9268	0.9285	0.9302	0.9319	0.9337
87	0.9185	0.9201	0.9218	0.9235	0.9252	0.9269	0.9286	0.9303	0.9321	0.9338
88	0.9185	0.9201	0.9218	0.9235	0.9252	0.9270	0.9287	0.9304	0.9322	0.9340
89	0.9185	0.9202	0.9218	0.9235	0.9253	0.9270	0.9288	0.9305	0.9323	0.9341

Table 5a - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 1% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.9306	0.9318	0.9330	0.9341	0.9351	0.9361	0.9371	0.9379	0.9388	0.9395
76	0.9313	0.9325	0.9337	0.9349	0.9360	0.9371	0.9381	0.9390	0.9399	0.9407
77	0.9319	0.9332	0.9345	0.9357	0.9369	0.9380	0.9390	0.9400	0.9410	0.9418
78	0.9325	0.9338	0.9351	0.9364	0.9377	0.9388	0.9399	0.9410	0.9420	0.9429
79	0.9330	0.9344	0.9358	0.9371	0.9384	0.9396	0.9408	0.9419	0.9430	0.9439
80	0.9334	0.9349	0.9363	0.9377	0.9391	0.9403	0.9416	0.9427	0.9438	0.9449
81	0.9339	0.9354	0.9368	0.9383	0.9397	0.9410	0.9423	0.9435	0.9447	0.9458
82	0.9342	0.9358	0.9373	0.9388	0.9402	0.9416	0.9430	0.9442	0.9455	0.9466
83	0.9346	0.9362	0.9377	0.9392	0.9407	0.9422	0.9436	0.9449	0.9462	0.9474
84	0.9349	0.9365	0.9381	0.9397	0.9412	0.9427	0.9441	0.9455	0.9468	0.9481
85	0.9351	0.9368	0.9384	0.9400	0.9416	0.9431	0.9446	0.9460	0.9474	0.9487
86	0.9354	0.9370	0.9387	0.9403	0.9419	0.9435	0.9450	0.9465	0.9479	0.9493
87	0.9355	0.9373	0.9389	0.9406	0.9423	0.9439	0.9454	0.9470	0.9484	0.9498
88	0.9357	0.9374	0.9392	0.9409	0.9425	0.9442	0.9458	0.9473	0.9489	0.9503
89	0.9358	0.9376	0.9393	0.9411	0.9428	0.9444	0.9461	0.9477	0.9492	0.9507

Age	80	81	82	83	84	85	86	87	88	89
75	0.9402	0.9408	0.9414	0.9420	0.9424	0.9428	0.9432	0.9436	0.9438	0.9441
76	0.9415	0.9422	0.9428	0.9434	0.9439	0.9443	0.9448	0.9451	0.9455	0.9457
77	0.9427	0.9434	0.9441	0.9447	0.9453	0.9458	0.9462	0.9467	0.9470	0.9473
78	0.9438	0.9446	0.9453	0.9460	0.9466	0.9472	0.9477	0.9481	0.9485	0.9489
79	0.9449	0.9457	0.9465	0.9472	0.9479	0.9485	0.9491	0.9496	0.9500	0.9504
80	0.9459	0.9468	0.9476	0.9484	0.9491	0.9498	0.9504	0.9509	0.9514	0.9519
81	0.9468	0.9478	0.9487	0.9495	0.9503	0.9510	0.9517	0.9523	0.9528	0.9533
82	0.9477	0.9487	0.9497	0.9506	0.9514	0.9522	0.9529	0.9535	0.9541	0.9546
83	0.9485	0.9496	0.9506	0.9516	0.9525	0.9533	0.9540	0.9547	0.9554	0.9559
84	0.9493	0.9504	0.9515	0.9525	0.9534	0.9543	0.9551	0.9559	0.9566	0.9572
85	0.9500	0.9512	0.9523	0.9534	0.9544	0.9553	0.9561	0.9569	0.9577	0.9584
86	0.9506	0.9519	0.9530	0.9542	0.9552	0.9562	0.9571	0.9580	0.9588	0.9595
87	0.9512	0.9525	0.9537	0.9549	0.9560	0.9570	0.9580	0.9589	0.9598	0.9606
88	0.9517	0.9531	0.9543	0.9556	0.9567	0.9578	0.9588	0.9598	0.9607	0.9616
89	0.9522	0.9536	0.9549	0.9562	0.9574	0.9585	0.9596	0.9606	0.9616	0.9625

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	100% Joint and Survivor Annuity with Pop-Up

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
30	0.7644	0.7649	0.7654	0.7659	0.7663	0.7668	0.7672	0.7676	0.7680	0.7684
31	0.7649	0.7654	0.7659	0.7665	0.7670	0.7674	0.7679	0.7684	0.7688	0.7692
32	0.7654	0.7659	0.7665	0.7670	0.7676	0.7681	0.7686	0.7691	0.7696	0.7700
33	0.7659	0.7665	0.7670	0.7676	0.7682	0.7687	0.7693	0.7698	0.7703	0.7708
34	0.7663	0.7670	0.7676	0.7682	0.7688	0.7694	0.7700	0.7705	0.7711	0.7716
35	0.7668	0.7674	0.7681	0.7687	0.7694	0.7700	0.7706	0.7712	0.7718	0.7724
36	0.7672	0.7679	0.7686	0.7693	0.7700	0.7706	0.7713	0.7719	0.7726	0.7732
37	0.7677	0.7684	0.7691	0.7698	0.7705	0.7712	0.7719	0.7726	0.7733	0.7739
38	0.7681	0.7688	0.7696	0.7703	0.7711	0.7718	0.7726	0.7733	0.7740	0.7747
39	0.7685	0.7692	0.7700	0.7708	0.7716	0.7724	0.7732	0.7740	0.7747	0.7755
40	0.7688	0.7697	0.7705	0.7713	0.7721	0.7730	0.7738	0.7746	0.7754	0.7762
41	0.7692	0.7701	0.7709	0.7718	0.7726	0.7735	0.7744	0.7752	0.7761	0.7769
42	0.7695	0.7704	0.7713	0.7722	0.7731	0.7740	0.7749	0.7758	0.7767	0.7776
43	0.7699	0.7708	0.7717	0.7726	0.7736	0.7745	0.7755	0.7764	0.7773	0.7783
44	0.7702	0.7711	0.7721	0.7731	0.7740	0.7750	0.7760	0.7770	0.7779	0.7789

Age	40	41	42	43	44	45	46	47	48	49
30	0.7688	0.7692	0.7695	0.7698	0.7701	0.7704	0.7707	0.7710	0.7712	0.7714
31	0.7696	0.7700	0.7704	0.7707	0.7711	0.7714	0.7717	0.7720	0.7723	0.7725
32	0.7705	0.7709	0.7713	0.7717	0.7720	0.7724	0.7727	0.7730	0.7733	0.7736
33	0.7713	0.7718	0.7722	0.7726	0.7730	0.7734	0.7738	0.7741	0.7744	0.7747
34	0.7721	0.7726	0.7731	0.7736	0.7740	0.7744	0.7748	0.7752	0.7755	0.7759
35	0.7729	0.7735	0.7740	0.7745	0.7750	0.7754	0.7759	0.7763	0.7767	0.7770
36	0.7738	0.7743	0.7749	0.7754	0.7760	0.7764	0.7769	0.7774	0.7778	0.7782
37	0.7746	0.7752	0.7758	0.7764	0.7769	0.7775	0.7780	0.7785	0.7789	0.7794
38	0.7754	0.7761	0.7767	0.7773	0.7779	0.7785	0.7791	0.7796	0.7801	0.7806
39	0.7762	0.7769	0.7776	0.7782	0.7789	0.7795	0.7801	0.7807	0.7812	0.7818
40	0.7770	0.7777	0.7785	0.7792	0.7799	0.7805	0.7812	0.7818	0.7824	0.7830
41	0.7777	0.7785	0.7793	0.7801	0.7808	0.7815	0.7822	0.7829	0.7836	0.7842
42	0.7785	0.7793	0.7802	0.7810	0.7818	0.7825	0.7833	0.7840	0.7847	0.7854
43	0.7792	0.7801	0.7810	0.7818	0.7827	0.7835	0.7843	0.7851	0.7858	0.7866
44	0.7799	0.7808	0.7818	0.7827	0.7836	0.7845	0.7853	0.7862	0.7870	0.7878

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
30	0.7717	0.7719	0.7720	0.7722	0.7724	0.7725	0.7727	0.7728	0.7729	0.7730
31	0.7728	0.7730	0.7732	0.7734	0.7736	0.7737	0.7739	0.7740	0.7741	0.7743
32	0.7739	0.7741	0.7743	0.7746	0.7748	0.7749	0.7751	0.7753	0.7754	0.7755
33	0.7750	0.7753	0.7755	0.7758	0.7760	0.7762	0.7764	0.7765	0.7767	0.7769
34	0.7762	0.7765	0.7768	0.7770	0.7772	0.7775	0.7777	0.7779	0.7781	0.7782
35	0.7774	0.7777	0.7780	0.7783	0.7785	0.7788	0.7790	0.7792	0.7794	0.7796
36	0.7786	0.7789	0.7793	0.7796	0.7799	0.7801	0.7804	0.7806	0.7808	0.7810
37	0.7798	0.7802	0.7805	0.7809	0.7812	0.7815	0.7818	0.7820	0.7823	0.7825
38	0.7810	0.7814	0.7818	0.7822	0.7826	0.7829	0.7832	0.7835	0.7838	0.7840
39	0.7823	0.7827	0.7832	0.7836	0.7840	0.7843	0.7847	0.7850	0.7853	0.7855
40	0.7835	0.7840	0.7845	0.7849	0.7854	0.7858	0.7861	0.7865	0.7868	0.7871
41	0.7847	0.7853	0.7858	0.7863	0.7868	0.7872	0.7876	0.7880	0.7884	0.7887
42	0.7860	0.7866	0.7872	0.7877	0.7882	0.7887	0.7892	0.7896	0.7900	0.7904
43	0.7873	0.7879	0.7885	0.7891	0.7897	0.7902	0.7907	0.7912	0.7916	0.7920
44	0.7885	0.7892	0.7899	0.7905	0.7911	0.7917	0.7923	0.7928	0.7932	0.7937

Age	60	61	62	63	64	65	66	67	68	69
30	0.7731	0.7732	0.7733	0.7734	0.7735	0.7735	0.7736	0.7736	0.7737	0.7737
31	0.7744	0.7745	0.7746	0.7747	0.7747	0.7748	0.7749	0.7749	0.7750	0.7750
32	0.7757	0.7758	0.7759	0.7760	0.7761	0.7761	0.7762	0.7763	0.7763	0.7764
33	0.7770	0.7771	0.7772	0.7773	0.7774	0.7775	0.7776	0.7777	0.7777	0.7778
34	0.7784	0.7785	0.7786	0.7787	0.7788	0.7789	0.7790	0.7791	0.7792	0.7792
35	0.7798	0.7799	0.7801	0.7802	0.7803	0.7804	0.7805	0.7806	0.7807	0.7807
36	0.7812	0.7814	0.7815	0.7817	0.7818	0.7819	0.7820	0.7821	0.7822	0.7823
37	0.7827	0.7829	0.7831	0.7832	0.7834	0.7835	0.7836	0.7837	0.7838	0.7839
38	0.7842	0.7844	0.7846	0.7848	0.7850	0.7851	0.7852	0.7853	0.7854	0.7855
39	0.7858	0.7860	0.7862	0.7864	0.7866	0.7868	0.7869	0.7870	0.7871	0.7872
40	0.7874	0.7876	0.7879	0.7881	0.7883	0.7885	0.7886	0.7888	0.7889	0.7890
41	0.7890	0.7893	0.7896	0.7898	0.7900	0.7902	0.7904	0.7905	0.7907	0.7908
42	0.7907	0.7910	0.7913	0.7915	0.7918	0.7920	0.7922	0.7924	0.7925	0.7927
43	0.7924	0.7927	0.7930	0.7933	0.7936	0.7938	0.7941	0.7943	0.7944	0.7946
44	0.7941	0.7945	0.7948	0.7952	0.7954	0.7957	0.7960	0.7962	0.7964	0.7965

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
30	0.7737	0.7738	0.7738	0.7738	0.7738	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7751	0.7751	0.7751	0.7751	0.7752	0.7752	0.7752	0.7752	0.7752	0.7752
32	0.7764	0.7765	0.7765	0.7765	0.7765	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7778	0.7779	0.7779	0.7779	0.7780	0.7780	0.7780	0.7780	0.7780	0.7780
34	0.7793	0.7793	0.7794	0.7794	0.7794	0.7795	0.7795	0.7795	0.7795	0.7795
35	0.7808	0.7808	0.7809	0.7809	0.7810	0.7810	0.7810	0.7810	0.7811	0.7811
36	0.7823	0.7824	0.7825	0.7825	0.7825	0.7826	0.7826	0.7826	0.7826	0.7827
37	0.7840	0.7840	0.7841	0.7841	0.7842	0.7842	0.7842	0.7843	0.7843	0.7843
38	0.7856	0.7857	0.7858	0.7858	0.7859	0.7859	0.7859	0.7860	0.7860	0.7860
39	0.7873	0.7874	0.7875	0.7875	0.7876	0.7876	0.7877	0.7877	0.7877	0.7878
40	0.7891	0.7892	0.7893	0.7893	0.7894	0.7895	0.7895	0.7895	0.7896	0.7896
41	0.7909	0.7910	0.7911	0.7912	0.7913	0.7913	0.7914	0.7914	0.7914	0.7915
42	0.7928	0.7929	0.7930	0.7931	0.7932	0.7932	0.7933	0.7933	0.7934	0.7934
43	0.7947	0.7949	0.7950	0.7951	0.7951	0.7952	0.7953	0.7953	0.7954	0.7954
44	0.7967	0.7968	0.7970	0.7971	0.7972	0.7972	0.7973	0.7974	0.7974	0.7975

Age	80	81	82	83	84	85	86	87	88	89
30	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739	0.7739
31	0.7752	0.7752	0.7752	0.7752	0.7753	0.7753	0.7753	0.7753	0.7753	0.7752
32	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766	0.7766
33	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781	0.7781
34	0.7795	0.7795	0.7795	0.7796	0.7796	0.7796	0.7796	0.7796	0.7796	0.7796
35	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811	0.7811
36	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827	0.7827
37	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843	0.7843
38	0.7860	0.7860	0.7860	0.7860	0.7861	0.7861	0.7861	0.7861	0.7861	0.7861
39	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878	0.7878
40	0.7896	0.7896	0.7896	0.7896	0.7897	0.7897	0.7897	0.7897	0.7897	0.7897
41	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915	0.7915
42	0.7934	0.7934	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935	0.7935
43	0.7954	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955	0.7955
44	0.7975	0.7975	0.7975	0.7976	0.7976	0.7976	0.7976	0.7976	0.7976	0.7976

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
45	0.7705	0.7715	0.7724	0.7734	0.7744	0.7755	0.7765	0.7775	0.7785	0.7795
46	0.7708	0.7718	0.7728	0.7738	0.7748	0.7759	0.7770	0.7780	0.7791	0.7802
47	0.7710	0.7720	0.7731	0.7742	0.7752	0.7763	0.7774	0.7785	0.7796	0.7807
48	0.7713	0.7723	0.7734	0.7745	0.7756	0.7767	0.7778	0.7790	0.7801	0.7813
49	0.7715	0.7726	0.7737	0.7748	0.7759	0.7771	0.7782	0.7794	0.7806	0.7818
50	0.7717	0.7728	0.7739	0.7751	0.7762	0.7774	0.7786	0.7798	0.7811	0.7823
51	0.7719	0.7730	0.7742	0.7754	0.7765	0.7778	0.7790	0.7802	0.7815	0.7828
52	0.7721	0.7733	0.7744	0.7756	0.7768	0.7781	0.7793	0.7806	0.7819	0.7832
53	0.7723	0.7734	0.7746	0.7758	0.7771	0.7784	0.7796	0.7810	0.7823	0.7837
54	0.7725	0.7736	0.7748	0.7761	0.7773	0.7786	0.7799	0.7813	0.7827	0.7841
55	0.7726	0.7738	0.7750	0.7763	0.7776	0.7789	0.7802	0.7816	0.7830	0.7844
56	0.7728	0.7740	0.7752	0.7765	0.7778	0.7791	0.7805	0.7819	0.7833	0.7848
57	0.7729	0.7741	0.7754	0.7766	0.7780	0.7793	0.7807	0.7821	0.7836	0.7851
58	0.7730	0.7742	0.7755	0.7768	0.7781	0.7795	0.7809	0.7824	0.7839	0.7854
59	0.7731	0.7744	0.7756	0.7770	0.7783	0.7797	0.7811	0.7826	0.7841	0.7857

Age	40	41	42	43	44	45	46	47	48	49
45	0.7806	0.7816	0.7826	0.7835	0.7845	0.7854	0.7863	0.7872	0.7881	0.7889
46	0.7812	0.7823	0.7833	0.7843	0.7854	0.7864	0.7873	0.7883	0.7892	0.7901
47	0.7818	0.7829	0.7840	0.7851	0.7862	0.7873	0.7883	0.7893	0.7903	0.7912
48	0.7824	0.7836	0.7847	0.7859	0.7870	0.7881	0.7892	0.7903	0.7913	0.7924
49	0.7830	0.7842	0.7854	0.7866	0.7878	0.7890	0.7901	0.7913	0.7924	0.7934
50	0.7836	0.7848	0.7861	0.7873	0.7885	0.7898	0.7910	0.7922	0.7934	0.7945
51	0.7841	0.7854	0.7867	0.7880	0.7893	0.7906	0.7918	0.7931	0.7943	0.7955
52	0.7846	0.7859	0.7873	0.7886	0.7900	0.7913	0.7926	0.7940	0.7953	0.7965
53	0.7850	0.7864	0.7878	0.7892	0.7906	0.7920	0.7934	0.7948	0.7962	0.7975
54	0.7855	0.7869	0.7883	0.7898	0.7912	0.7927	0.7941	0.7956	0.7970	0.7984
55	0.7859	0.7873	0.7888	0.7903	0.7918	0.7933	0.7948	0.7963	0.7978	0.7993
56	0.7863	0.7878	0.7893	0.7908	0.7924	0.7939	0.7955	0.7971	0.7986	0.8002
57	0.7866	0.7881	0.7897	0.7913	0.7929	0.7945	0.7961	0.7977	0.7994	0.8010
58	0.7869	0.7885	0.7901	0.7917	0.7934	0.7950	0.7967	0.7984	0.8001	0.8017
59	0.7872	0.7888	0.7905	0.7921	0.7938	0.7955	0.7973	0.7990	0.8007	0.8025

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
45	0.7897	0.7905	0.7912	0.7919	0.7926	0.7932	0.7938	0.7944	0.7949	0.7954
46	0.7910	0.7918	0.7926	0.7933	0.7941	0.7947	0.7954	0.7960	0.7966	0.7971
47	0.7922	0.7930	0.7939	0.7947	0.7955	0.7963	0.7970	0.7976	0.7982	0.7988
48	0.7933	0.7943	0.7952	0.7961	0.7969	0.7978	0.7985	0.7992	0.7999	0.8006
49	0.7945	0.7955	0.7965	0.7975	0.7984	0.7992	0.8001	0.8009	0.8016	0.8023
50	0.7956	0.7967	0.7978	0.7988	0.7998	0.8007	0.8016	0.8025	0.8033	0.8041
51	0.7967	0.7979	0.7990	0.8001	0.8012	0.8022	0.8032	0.8041	0.8050	0.8058
52	0.7978	0.7990	0.8002	0.8014	0.8025	0.8036	0.8047	0.8057	0.8066	0.8075
53	0.7988	0.8001	0.8014	0.8027	0.8039	0.8050	0.8061	0.8072	0.8082	0.8092
54	0.7998	0.8012	0.8026	0.8039	0.8052	0.8064	0.8076	0.8087	0.8099	0.8109
55	0.8008	0.8022	0.8037	0.8051	0.8064	0.8077	0.8090	0.8102	0.8114	0.8126
56	0.8017	0.8032	0.8047	0.8062	0.8076	0.8090	0.8104	0.8117	0.8130	0.8142
57	0.8026	0.8042	0.8057	0.8073	0.8088	0.8103	0.8117	0.8131	0.8145	0.8158
58	0.8034	0.8051	0.8067	0.8083	0.8099	0.8115	0.8130	0.8145	0.8160	0.8174
59	0.8042	0.8059	0.8076	0.8093	0.8110	0.8126	0.8143	0.8158	0.8174	0.8189

Age	60	61	62	63	64	65	66	67	68	69
45	0.7958	0.7963	0.7967	0.7970	0.7973	0.7976	0.7979	0.7981	0.7984	0.7986
46	0.7976	0.7981	0.7985	0.7989	0.7993	0.7996	0.7999	0.8002	0.8004	0.8006
47	0.7994	0.7999	0.8004	0.8008	0.8012	0.8016	0.8019	0.8022	0.8025	0.8027
48	0.8012	0.8017	0.8023	0.8027	0.8032	0.8036	0.8040	0.8043	0.8046	0.8049
49	0.8030	0.8036	0.8042	0.8047	0.8052	0.8056	0.8060	0.8064	0.8067	0.8070
50	0.8048	0.8055	0.8061	0.8067	0.8072	0.8077	0.8081	0.8086	0.8089	0.8093
51	0.8066	0.8073	0.8080	0.8086	0.8092	0.8098	0.8103	0.8107	0.8112	0.8115
52	0.8084	0.8092	0.8099	0.8106	0.8113	0.8119	0.8124	0.8129	0.8134	0.8138
53	0.8102	0.8110	0.8119	0.8126	0.8133	0.8140	0.8146	0.8152	0.8157	0.8161
54	0.8119	0.8129	0.8138	0.8146	0.8154	0.8161	0.8168	0.8174	0.8180	0.8185
55	0.8137	0.8147	0.8157	0.8166	0.8174	0.8182	0.8190	0.8197	0.8203	0.8209
56	0.8154	0.8165	0.8176	0.8185	0.8195	0.8204	0.8212	0.8219	0.8226	0.8232
57	0.8171	0.8183	0.8194	0.8205	0.8215	0.8225	0.8233	0.8242	0.8249	0.8256
58	0.8187	0.8200	0.8212	0.8224	0.8235	0.8245	0.8255	0.8264	0.8272	0.8280
59	0.8203	0.8217	0.8230	0.8243	0.8255	0.8266	0.8277	0.8286	0.8296	0.8304

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
45	0.7987	0.7989	0.7990	0.7991	0.7992	0.7993	0.7994	0.7995	0.7995	0.7996
46	0.8008	0.8010	0.8011	0.8013	0.8014	0.8015	0.8016	0.8016	0.8017	0.8018
47	0.8029	0.8031	0.8033	0.8034	0.8036	0.8037	0.8038	0.8039	0.8039	0.8040
48	0.8051	0.8053	0.8055	0.8057	0.8058	0.8059	0.8061	0.8062	0.8062	0.8063
49	0.8073	0.8076	0.8078	0.8080	0.8081	0.8083	0.8084	0.8085	0.8086	0.8087
50	0.8096	0.8098	0.8101	0.8103	0.8105	0.8106	0.8108	0.8109	0.8110	0.8111
51	0.8119	0.8122	0.8124	0.8127	0.8129	0.8131	0.8132	0.8134	0.8135	0.8136
52	0.8142	0.8145	0.8148	0.8151	0.8153	0.8155	0.8157	0.8159	0.8160	0.8161
53	0.8166	0.8169	0.8173	0.8176	0.8178	0.8181	0.8183	0.8184	0.8186	0.8187
54	0.8190	0.8194	0.8198	0.8201	0.8204	0.8206	0.8209	0.8211	0.8212	0.8214
55	0.8214	0.8218	0.8223	0.8226	0.8230	0.8233	0.8235	0.8237	0.8239	0.8241
56	0.8238	0.8243	0.8248	0.8252	0.8256	0.8259	0.8262	0.8265	0.8267	0.8269
57	0.8263	0.8268	0.8274	0.8278	0.8282	0.8286	0.8289	0.8292	0.8295	0.8297
58	0.8287	0.8294	0.8299	0.8305	0.8309	0.8313	0.8317	0.8320	0.8323	0.8325
59	0.8312	0.8319	0.8325	0.8331	0.8336	0.8341	0.8345	0.8349	0.8352	0.8354

Age	80	81	82	83	84	85	86	87	88	89
45	0.7996	0.7996	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997	0.7997
46	0.8018	0.8018	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019	0.8019
47	0.8040	0.8041	0.8041	0.8041	0.8042	0.8042	0.8042	0.8042	0.8042	0.8042
48	0.8064	0.8064	0.8064	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065	0.8065
49	0.8087	0.8088	0.8088	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089	0.8089
50	0.8112	0.8112	0.8113	0.8113	0.8113	0.8114	0.8114	0.8114	0.8114	0.8114
51	0.8137	0.8137	0.8138	0.8138	0.8138	0.8139	0.8139	0.8139	0.8139	0.8139
52	0.8162	0.8163	0.8163	0.8164	0.8164	0.8165	0.8165	0.8165	0.8165	0.8165
53	0.8188	0.8189	0.8190	0.8190	0.8191	0.8191	0.8191	0.8192	0.8192	0.8192
54	0.8215	0.8216	0.8217	0.8217	0.8218	0.8218	0.8219	0.8219	0.8219	0.8219
55	0.8242	0.8243	0.8244	0.8245	0.8246	0.8246	0.8247	0.8247	0.8247	0.8247
56	0.8270	0.8271	0.8273	0.8273	0.8274	0.8275	0.8275	0.8276	0.8276	0.8276
57	0.8299	0.8300	0.8301	0.8302	0.8303	0.8304	0.8304	0.8305	0.8305	0.8305
58	0.8327	0.8329	0.8331	0.8332	0.8333	0.8334	0.8334	0.8335	0.8335	0.8335
59	0.8357	0.8359	0.8360	0.8362	0.8363	0.8364	0.8365	0.8365	0.8366	0.8366

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
60	0.7732	0.7745	0.7758	0.7771	0.7785	0.7799	0.7813	0.7828	0.7844	0.7859
61	0.7733	0.7746	0.7759	0.7772	0.7786	0.7800	0.7815	0.7830	0.7846	0.7862
62	0.7734	0.7747	0.7760	0.7773	0.7787	0.7802	0.7817	0.7832	0.7848	0.7864
63	0.7735	0.7748	0.7761	0.7774	0.7788	0.7803	0.7818	0.7833	0.7849	0.7866
64	0.7735	0.7748	0.7762	0.7775	0.7790	0.7804	0.7819	0.7835	0.7851	0.7867
65	0.7736	0.7749	0.7762	0.7776	0.7790	0.7805	0.7820	0.7836	0.7852	0.7869
66	0.7737	0.7750	0.7763	0.7777	0.7791	0.7806	0.7821	0.7837	0.7854	0.7870
67	0.7737	0.7750	0.7764	0.7778	0.7792	0.7807	0.7822	0.7838	0.7855	0.7872
68	0.7738	0.7751	0.7764	0.7778	0.7793	0.7808	0.7823	0.7839	0.7856	0.7873
69	0.7738	0.7751	0.7765	0.7779	0.7793	0.7808	0.7824	0.7840	0.7857	0.7874
70	0.7738	0.7751	0.7765	0.7779	0.7794	0.7809	0.7825	0.7841	0.7857	0.7875
71	0.7739	0.7752	0.7765	0.7780	0.7794	0.7809	0.7825	0.7841	0.7858	0.7876
72	0.7739	0.7752	0.7766	0.7780	0.7795	0.7810	0.7826	0.7842	0.7859	0.7876
73	0.7739	0.7752	0.7766	0.7780	0.7795	0.7810	0.7826	0.7842	0.7859	0.7877
74	0.7739	0.7752	0.7766	0.7781	0.7795	0.7811	0.7826	0.7843	0.7860	0.7877

Age	40	41	42	43	44	45	46	47	48	49
60	0.7875	0.7892	0.7908	0.7925	0.7943	0.7960	0.7978	0.7995	0.8013	0.8031
61	0.7878	0.7894	0.7911	0.7929	0.7946	0.7964	0.7982	0.8001	0.8019	0.8038
62	0.7880	0.7897	0.7914	0.7932	0.7950	0.7968	0.7987	0.8005	0.8024	0.8043
63	0.7882	0.7899	0.7917	0.7935	0.7953	0.7972	0.7991	0.8010	0.8029	0.8049
64	0.7884	0.7902	0.7919	0.7938	0.7956	0.7975	0.7994	0.8014	0.8034	0.8054
65	0.7886	0.7904	0.7922	0.7940	0.7959	0.7978	0.7998	0.8018	0.8038	0.8058
66	0.7888	0.7905	0.7924	0.7942	0.7961	0.7981	0.8001	0.8021	0.8042	0.8063
67	0.7889	0.7907	0.7925	0.7944	0.7964	0.7983	0.8004	0.8024	0.8045	0.8066
68	0.7890	0.7908	0.7927	0.7946	0.7966	0.7986	0.8006	0.8027	0.8048	0.8070
69	0.7892	0.7910	0.7928	0.7948	0.7967	0.7988	0.8008	0.8029	0.8051	0.8073
70	0.7893	0.7911	0.7930	0.7949	0.7969	0.7989	0.8010	0.8032	0.8053	0.8076
71	0.7893	0.7912	0.7931	0.7950	0.7970	0.7991	0.8012	0.8034	0.8056	0.8078
72	0.7894	0.7913	0.7932	0.7951	0.7972	0.7992	0.8014	0.8035	0.8058	0.8080
73	0.7895	0.7913	0.7933	0.7952	0.7973	0.7993	0.8015	0.8037	0.8059	0.8082
74	0.7895	0.7914	0.7933	0.7953	0.7974	0.7994	0.8016	0.8038	0.8061	0.8084

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
60	0.8049	0.8067	0.8085	0.8103	0.8120	0.8138	0.8155	0.8171	0.8187	0.8203
61	0.8056	0.8075	0.8093	0.8112	0.8130	0.8148	0.8166	0.8183	0.8201	0.8217
62	0.8063	0.8082	0.8101	0.8120	0.8139	0.8158	0.8177	0.8195	0.8213	0.8231
63	0.8068	0.8088	0.8108	0.8128	0.8148	0.8167	0.8187	0.8206	0.8225	0.8244
64	0.8074	0.8094	0.8115	0.8135	0.8156	0.8176	0.8196	0.8216	0.8236	0.8256
65	0.8079	0.8100	0.8121	0.8142	0.8163	0.8184	0.8205	0.8226	0.8247	0.8267
66	0.8084	0.8105	0.8127	0.8148	0.8170	0.8192	0.8214	0.8235	0.8257	0.8278
67	0.8088	0.8110	0.8132	0.8154	0.8176	0.8199	0.8221	0.8244	0.8266	0.8288
68	0.8092	0.8114	0.8136	0.8159	0.8182	0.8205	0.8228	0.8251	0.8274	0.8297
69	0.8095	0.8118	0.8141	0.8164	0.8187	0.8211	0.8235	0.8259	0.8282	0.8306
70	0.8098	0.8121	0.8145	0.8168	0.8192	0.8216	0.8241	0.8265	0.8290	0.8314
71	0.8101	0.8124	0.8148	0.8172	0.8196	0.8221	0.8246	0.8271	0.8296	0.8321
72	0.8103	0.8127	0.8151	0.8176	0.8200	0.8225	0.8251	0.8276	0.8302	0.8328
73	0.8106	0.8129	0.8154	0.8179	0.8204	0.8229	0.8255	0.8281	0.8307	0.8334
74	0.8107	0.8132	0.8156	0.8181	0.8207	0.8233	0.8259	0.8285	0.8312	0.8339

Age	60	61	62	63	64	65	66	67	68	69
60	0.8219	0.8233	0.8248	0.8261	0.8274	0.8286	0.8298	0.8308	0.8318	0.8328
61	0.8234	0.8249	0.8264	0.8279	0.8293	0.8306	0.8318	0.8330	0.8341	0.8351
62	0.8248	0.8265	0.8281	0.8296	0.8311	0.8325	0.8339	0.8351	0.8363	0.8374
63	0.8262	0.8279	0.8297	0.8313	0.8329	0.8344	0.8359	0.8372	0.8385	0.8397
64	0.8275	0.8293	0.8312	0.8329	0.8346	0.8362	0.8378	0.8392	0.8406	0.8419
65	0.8287	0.8307	0.8326	0.8345	0.8363	0.8380	0.8396	0.8412	0.8427	0.8441
66	0.8299	0.8319	0.8340	0.8359	0.8378	0.8397	0.8414	0.8431	0.8447	0.8462
67	0.8310	0.8331	0.8352	0.8373	0.8393	0.8413	0.8431	0.8449	0.8466	0.8482
68	0.8320	0.8343	0.8365	0.8386	0.8407	0.8428	0.8447	0.8466	0.8485	0.8502
69	0.8330	0.8353	0.8376	0.8398	0.8421	0.8442	0.8463	0.8483	0.8502	0.8521
70	0.8338	0.8362	0.8386	0.8410	0.8433	0.8455	0.8477	0.8499	0.8519	0.8539
71	0.8346	0.8371	0.8396	0.8420	0.8445	0.8468	0.8491	0.8513	0.8535	0.8555
72	0.8354	0.8379	0.8405	0.8430	0.8455	0.8480	0.8504	0.8527	0.8550	0.8571
73	0.8360	0.8387	0.8413	0.8439	0.8465	0.8491	0.8515	0.8540	0.8564	0.8586
74	0.8366	0.8393	0.8420	0.8447	0.8474	0.8500	0.8526	0.8552	0.8576	0.8600

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
60	0.8336	0.8344	0.8351	0.8358	0.8363	0.8368	0.8373	0.8377	0.8381	0.8384
61	0.8360	0.8369	0.8377	0.8384	0.8390	0.8396	0.8401	0.8406	0.8410	0.8413
62	0.8384	0.8394	0.8403	0.8410	0.8418	0.8424	0.8430	0.8435	0.8439	0.8443
63	0.8408	0.8418	0.8428	0.8437	0.8445	0.8452	0.8458	0.8464	0.8469	0.8473
64	0.8431	0.8443	0.8453	0.8463	0.8471	0.8479	0.8486	0.8493	0.8498	0.8503
65	0.8454	0.8466	0.8478	0.8488	0.8498	0.8507	0.8514	0.8522	0.8528	0.8534
66	0.8476	0.8489	0.8502	0.8513	0.8524	0.8533	0.8542	0.8550	0.8557	0.8563
67	0.8498	0.8512	0.8525	0.8538	0.8549	0.8560	0.8570	0.8578	0.8586	0.8593
68	0.8518	0.8534	0.8548	0.8562	0.8574	0.8586	0.8596	0.8606	0.8615	0.8622
69	0.8538	0.8555	0.8570	0.8585	0.8599	0.8611	0.8623	0.8633	0.8643	0.8651
70	0.8557	0.8575	0.8592	0.8607	0.8622	0.8636	0.8648	0.8660	0.8670	0.8680
71	0.8575	0.8594	0.8612	0.8629	0.8645	0.8659	0.8673	0.8686	0.8697	0.8708
72	0.8592	0.8612	0.8631	0.8650	0.8666	0.8682	0.8697	0.8711	0.8723	0.8735
73	0.8609	0.8630	0.8650	0.8669	0.8687	0.8704	0.8720	0.8735	0.8748	0.8761
74	0.8624	0.8646	0.8667	0.8688	0.8707	0.8725	0.8742	0.8758	0.8773	0.8786

Age	80	81	82	83	84	85	86	87	88	89
60	0.8386	0.8389	0.8391	0.8392	0.8394	0.8395	0.8396	0.8396	0.8397	0.8397
61	0.8416	0.8419	0.8421	0.8423	0.8425	0.8426	0.8427	0.8428	0.8428	0.8429
62	0.8447	0.8450	0.8452	0.8454	0.8456	0.8458	0.8459	0.8460	0.8461	0.8461
63	0.8477	0.8481	0.8483	0.8486	0.8488	0.8490	0.8491	0.8492	0.8493	0.8494
64	0.8508	0.8512	0.8515	0.8518	0.8520	0.8522	0.8524	0.8525	0.8526	0.8527
65	0.8538	0.8543	0.8546	0.8550	0.8552	0.8555	0.8557	0.8558	0.8560	0.8561
66	0.8569	0.8574	0.8578	0.8582	0.8585	0.8588	0.8590	0.8592	0.8593	0.8594
67	0.8599	0.8605	0.8610	0.8614	0.8617	0.8620	0.8623	0.8625	0.8627	0.8628
68	0.8629	0.8636	0.8641	0.8646	0.8650	0.8653	0.8656	0.8659	0.8661	0.8662
69	0.8659	0.8666	0.8672	0.8677	0.8682	0.8686	0.8689	0.8692	0.8695	0.8697
70	0.8688	0.8696	0.8703	0.8709	0.8714	0.8718	0.8722	0.8726	0.8728	0.8731
71	0.8717	0.8725	0.8733	0.8740	0.8745	0.8751	0.8755	0.8759	0.8762	0.8765
72	0.8745	0.8754	0.8763	0.8770	0.8777	0.8782	0.8787	0.8792	0.8796	0.8799
73	0.8772	0.8782	0.8792	0.8800	0.8807	0.8814	0.8819	0.8824	0.8829	0.8832
74	0.8799	0.8810	0.8820	0.8829	0.8837	0.8845	0.8851	0.8856	0.8861	0.8865

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 30	31	32	33	34	35	36	37	38	39
75	0.7739	0.7753	0.7766	0.7781	0.7796	0.7811	0.7827	0.7843	0.7860	0.7878
76	0.7739	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7843	0.7860	0.7878
77	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7844	0.7861	0.7878
78	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7844	0.7861	0.7879
79	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7844	0.7861	0.7879
80	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
81	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
82	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
83	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
84	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
85	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
86	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
87	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
88	0.7740	0.7753	0.7767	0.7781	0.7796	0.7812	0.7828	0.7844	0.7861	0.7879
89	0.7740	0.7753	0.7767	0.7781	0.7796	0.7811	0.7827	0.7844	0.7861	0.7879

Age	40	41	42	43	44	45	46	47	48	49
75	0.7896	0.7915	0.7934	0.7954	0.7974	0.7995	0.8017	0.8039	0.8062	0.8085
76	0.7896	0.7915	0.7934	0.7954	0.7975	0.7996	0.8018	0.8040	0.8063	0.8086
77	0.7897	0.7915	0.7935	0.7955	0.7975	0.7997	0.8019	0.8041	0.8064	0.8088
78	0.7897	0.7916	0.7935	0.7955	0.7976	0.7997	0.8019	0.8042	0.8065	0.8088
79	0.7897	0.7916	0.7935	0.7956	0.7976	0.7998	0.8020	0.8042	0.8065	0.8089
80	0.7897	0.7916	0.7936	0.7956	0.7977	0.7998	0.8020	0.8043	0.8066	0.8090
81	0.7897	0.7916	0.7936	0.7956	0.7977	0.7998	0.8020	0.8043	0.8066	0.8090
82	0.7897	0.7916	0.7936	0.7956	0.7977	0.7998	0.8020	0.8043	0.8067	0.8091
83	0.7898	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8043	0.8067	0.8091
84	0.7898	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8044	0.8067	0.8091
85	0.7898	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8044	0.8067	0.8091
86	0.7898	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8044	0.8067	0.8091
87	0.7897	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8044	0.8067	0.8091
88	0.7897	0.7916	0.7936	0.7956	0.7977	0.7999	0.8021	0.8044	0.8067	0.8091
89	0.7897	0.7916	0.7936	0.7956	0.7977	0.7998	0.8021	0.8043	0.8067	0.8091

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 50	51	52	53	54	55	56	57	58	59
75	0.8109	0.8133	0.8158	0.8184	0.8209	0.8236	0.8262	0.8289	0.8316	0.8344
76	0.8110	0.8135	0.8160	0.8186	0.8212	0.8238	0.8265	0.8293	0.8320	0.8348
77	0.8112	0.8136	0.8162	0.8187	0.8214	0.8240	0.8268	0.8295	0.8324	0.8352
78	0.8113	0.8137	0.8163	0.8189	0.8215	0.8242	0.8270	0.8298	0.8326	0.8355
79	0.8113	0.8138	0.8164	0.8190	0.8217	0.8244	0.8272	0.8300	0.8329	0.8358
80	0.8114	0.8139	0.8165	0.8191	0.8218	0.8245	0.8273	0.8302	0.8331	0.8360
81	0.8115	0.8140	0.8166	0.8192	0.8219	0.8247	0.8275	0.8303	0.8333	0.8362
82	0.8115	0.8140	0.8166	0.8193	0.8220	0.8248	0.8276	0.8305	0.8334	0.8364
83	0.8115	0.8141	0.8167	0.8193	0.8220	0.8248	0.8277	0.8306	0.8335	0.8365
84	0.8116	0.8141	0.8167	0.8194	0.8221	0.8249	0.8277	0.8307	0.8336	0.8367
85	0.8116	0.8141	0.8167	0.8194	0.8221	0.8249	0.8278	0.8307	0.8337	0.8368
86	0.8116	0.8141	0.8167	0.8194	0.8222	0.8250	0.8278	0.8308	0.8338	0.8368
87	0.8116	0.8141	0.8167	0.8194	0.8222	0.8250	0.8279	0.8308	0.8338	0.8369
88	0.8116	0.8141	0.8167	0.8194	0.8222	0.8250	0.8279	0.8308	0.8338	0.8369
89	0.8116	0.8141	0.8167	0.8194	0.8222	0.8250	0.8279	0.8308	0.8338	0.8369

Age	60	61	62	63	64	65	66	67	68	69
75	0.8372	0.8399	0.8427	0.8455	0.8482	0.8509	0.8536	0.8563	0.8588	0.8613
76	0.8376	0.8405	0.8433	0.8461	0.8490	0.8518	0.8545	0.8573	0.8599	0.8625
77	0.8381	0.8409	0.8438	0.8467	0.8496	0.8525	0.8554	0.8582	0.8609	0.8636
78	0.8384	0.8414	0.8443	0.8473	0.8502	0.8532	0.8561	0.8590	0.8618	0.8646
79	0.8387	0.8417	0.8447	0.8477	0.8507	0.8538	0.8567	0.8597	0.8626	0.8655
80	0.8390	0.8420	0.8451	0.8481	0.8512	0.8543	0.8573	0.8604	0.8634	0.8663
81	0.8393	0.8423	0.8454	0.8485	0.8516	0.8547	0.8578	0.8609	0.8640	0.8670
82	0.8394	0.8425	0.8456	0.8488	0.8519	0.8551	0.8583	0.8614	0.8646	0.8677
83	0.8396	0.8427	0.8459	0.8490	0.8522	0.8554	0.8587	0.8619	0.8651	0.8682
84	0.8397	0.8429	0.8460	0.8493	0.8525	0.8557	0.8590	0.8622	0.8655	0.8687
85	0.8399	0.8430	0.8462	0.8494	0.8527	0.8560	0.8593	0.8626	0.8659	0.8691
86	0.8399	0.8431	0.8463	0.8496	0.8529	0.8562	0.8595	0.8628	0.8662	0.8695
87	0.8400	0.8432	0.8464	0.8497	0.8530	0.8563	0.8597	0.8631	0.8664	0.8698
88	0.8400	0.8432	0.8465	0.8498	0.8531	0.8565	0.8598	0.8632	0.8666	0.8701
89	0.8401	0.8433	0.8465	0.8498	0.8532	0.8565	0.8600	0.8634	0.8668	0.8703

Table 5b - NDPERS (Judges and Highway Patrol) - Healthy Lives
100% Joint and Survivor Annuity with Pop-Up with a 2% Annual Graduated Benefit Option

Member Age	Beneficiary 70	71	72	73	74	75	76	77	78	79
75	0.8638	0.8661	0.8684	0.8705	0.8726	0.8745	0.8763	0.8780	0.8796	0.8811
76	0.8651	0.8675	0.8699	0.8721	0.8743	0.8764	0.8783	0.8801	0.8818	0.8834
77	0.8663	0.8688	0.8713	0.8737	0.8759	0.8781	0.8802	0.8821	0.8839	0.8856
78	0.8673	0.8700	0.8726	0.8751	0.8775	0.8797	0.8819	0.8840	0.8859	0.8877
79	0.8683	0.8711	0.8738	0.8764	0.8789	0.8813	0.8835	0.8857	0.8878	0.8897
80	0.8692	0.8721	0.8748	0.8775	0.8801	0.8827	0.8851	0.8873	0.8895	0.8915
81	0.8700	0.8730	0.8758	0.8786	0.8813	0.8839	0.8864	0.8888	0.8911	0.8932
82	0.8707	0.8738	0.8767	0.8796	0.8824	0.8851	0.8877	0.8902	0.8926	0.8948
83	0.8714	0.8745	0.8775	0.8805	0.8834	0.8862	0.8889	0.8915	0.8940	0.8963
84	0.8719	0.8751	0.8782	0.8812	0.8842	0.8871	0.8899	0.8926	0.8952	0.8977
85	0.8724	0.8756	0.8788	0.8819	0.8850	0.8880	0.8909	0.8937	0.8964	0.8989
86	0.8728	0.8761	0.8793	0.8825	0.8857	0.8887	0.8917	0.8946	0.8974	0.9001
87	0.8732	0.8765	0.8798	0.8831	0.8863	0.8894	0.8925	0.8955	0.8983	0.9011
88	0.8735	0.8768	0.8802	0.8835	0.8868	0.8900	0.8931	0.8962	0.8992	0.9020
89	0.8737	0.8771	0.8805	0.8839	0.8872	0.8905	0.8937	0.8968	0.8999	0.9028

Age	80	81	82	83	84	85	86	87	88	89
75	0.8824	0.8836	0.8847	0.8857	0.8866	0.8875	0.8882	0.8888	0.8893	0.8898
76	0.8848	0.8862	0.8874	0.8885	0.8895	0.8904	0.8912	0.8919	0.8925	0.8930
77	0.8872	0.8886	0.8899	0.8911	0.8922	0.8932	0.8941	0.8949	0.8955	0.8961
78	0.8894	0.8909	0.8923	0.8937	0.8948	0.8959	0.8969	0.8978	0.8985	0.8992
79	0.8915	0.8931	0.8947	0.8961	0.8974	0.8985	0.8996	0.9006	0.9014	0.9022
80	0.8934	0.8952	0.8968	0.8984	0.8998	0.9010	0.9022	0.9032	0.9042	0.9050
81	0.8953	0.8971	0.8989	0.9005	0.9020	0.9034	0.9047	0.9058	0.9069	0.9078
82	0.8970	0.8990	0.9008	0.9026	0.9042	0.9057	0.9071	0.9083	0.9094	0.9104
83	0.8986	0.9007	0.9027	0.9045	0.9062	0.9078	0.9093	0.9107	0.9119	0.9130
84	0.9000	0.9023	0.9044	0.9063	0.9082	0.9099	0.9114	0.9129	0.9142	0.9154
85	0.9014	0.9037	0.9059	0.9080	0.9099	0.9118	0.9135	0.9150	0.9165	0.9178
86	0.9026	0.9051	0.9074	0.9096	0.9116	0.9135	0.9153	0.9170	0.9186	0.9200
87	0.9037	0.9063	0.9087	0.9110	0.9132	0.9152	0.9171	0.9189	0.9205	0.9221
88	0.9048	0.9074	0.9099	0.9123	0.9146	0.9167	0.9187	0.9206	0.9224	0.9240
89	0.9057	0.9084	0.9110	0.9135	0.9159	0.9181	0.9202	0.9222	0.9241	0.9259

Interest	8.00%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Spouse	50/50 GA 83 Male/Female w/margin
Form Converting From	100% Joint and Survivor Annuity with Pop-Up

Table 6 - NDPERS - Healthy Lives
20-Year Certain and Life Graduated Benefit Option

Age	1% Graduated Benefit Option	2% Graduated Benefit Option	Age	1% Graduated Benefit Option	2% Graduated Benefit Option
30	0.8848	0.7737	60	0.9147	0.8332
31	0.8854	0.7750	61	0.9158	0.8354
32	0.8861	0.7764	62	0.9169	0.8375
33	0.8868	0.7778	63	0.9179	0.8396
34	0.8875	0.7793	64	0.9189	0.8415
35	0.8883	0.7808	65	0.9199	0.8434
36	0.8890	0.7824	66	0.9207	0.8451
37	0.8898	0.7840	67	0.9216	0.8467
38	0.8907	0.7857	68	0.9223	0.8482
39	0.8915	0.7874	69	0.9230	0.8495
40	0.8924	0.7892	70	0.9236	0.8508
41	0.8934	0.7910	71	0.9242	0.8518
42	0.8943	0.7929	72	0.9246	0.8528
43	0.8953	0.7949	73	0.9251	0.8536
44	0.8963	0.7969	74	0.9254	0.8543
45	0.8973	0.7989	75	0.9257	0.8549
46	0.8984	0.8010	76	0.9260	0.8554
47	0.8995	0.8032	77	0.9262	0.8558
48	0.9006	0.8053	78	0.9264	0.8562
49	0.9017	0.8076	79	0.9265	0.8564
50	0.9028	0.8098	80	0.9266	0.8566
51	0.9040	0.8121	81	0.9267	0.8568
52	0.9052	0.8145	82	0.9267	0.8569
53	0.9064	0.8168	83	0.9268	0.8569
54	0.9076	0.8192	84	0.9268	0.8570
55	0.9088	0.8215	85	0.9268	0.8570
56	0.9100	0.8239	86	0.9268	0.8571
57	0.9112	0.8263	87	0.9268	0.8571
58	0.9124	0.8286	88	0.9268	0.8571
59	0.9135	0.8309	89	0.9268	0.8571

Interest 8%
Mortality:
Employee 50/50 GA 83 Male/Female w/margin
Form Converting From 20-Year Certain and Life Annuity

Table 7 - NDPERS - Healthy Lives
10-Year Certain and Life Graduated Benefit Option

Age	1% Graduated Benefit Option	2% Graduated Benefit Option	Age	1% Graduated Benefit Option	2% Graduated Benefit Option
30	0.8849	0.7739	60	0.9186	0.8403
31	0.8855	0.7752	61	0.9203	0.8435
32	0.8862	0.7766	62	0.9219	0.8468
33	0.8869	0.7781	63	0.9236	0.8501
34	0.8877	0.7795	64	0.9253	0.8534
35	0.8884	0.7811	65	0.9271	0.8567
36	0.8892	0.7827	66	0.9288	0.8601
37	0.8901	0.7844	67	0.9305	0.8635
38	0.8909	0.7861	68	0.9323	0.8669
39	0.8918	0.7879	69	0.9340	0.8702
40	0.8928	0.7897	70	0.9357	0.8735
41	0.8937	0.7916	71	0.9374	0.8768
42	0.8947	0.7936	72	0.9390	0.8800
43	0.8957	0.7956	73	0.9406	0.8832
44	0.8968	0.7977	74	0.9421	0.8862
45	0.8979	0.7999	75	0.9436	0.8891
46	0.8990	0.8021	76	0.9451	0.8919
47	0.9002	0.8044	77	0.9464	0.8946
48	0.9014	0.8068	78	0.9477	0.8971
49	0.9026	0.8092	79	0.9489	0.8995
50	0.9039	0.8117	80	0.9500	0.9017
51	0.9052	0.8142	81	0.9510	0.9037
52	0.9066	0.8168	82	0.9520	0.9055
53	0.9079	0.8195	83	0.9528	0.9072
54	0.9094	0.8223	84	0.9536	0.9087
55	0.9108	0.8251	85	0.9543	0.9101
56	0.9123	0.8280	86	0.9549	0.9113
57	0.9138	0.8310	87	0.9554	0.9123
58	0.9154	0.8340	88	0.9558	0.9132
59	0.9170	0.8371	89	0.9562	0.9140

Interest	8%
Mortality:	
Employee	50/50 GA 83 Male/Female w/margin
Form Converting From	10-Year Certain and Life Annuity

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Memorandum

TO: PERS Board

FROM: PERS Investment Committee

DATE: July 9, 2009

SUBJECT: Investment Expense Review

Background

The PERS Board had its biennial planning retreat in December of 2007. One of the outcomes of that meeting was to assign the following review to the PERS Audit committee and to ask the committee to report its findings and recommendations back to the PERS Board:

a. Review studies relating to the cost effectiveness of our investment program.
b. Review the effect the asset classes and types of investments have on overall plan risk.
c. Review and monitor the investment management fees.

The Audit Committee referred the above to the PERS Investment Committee. That committee met August 21, 2008, November 12, 2008, April 4, 2009 and June 24, 2009 and as part of its agenda for each of these meetings discussed the above topics.

Considerations

The following is the information reviewed by the committee:

1. The committee reviewed the history of the investment structure:

a. Before 1989:
    i. PERS – had its own investment function
    ii. State Investment Office (SIO) – did TFFR and other state offices
b. 1989 to present:
    i. OMB submitted legislation to reorganize the investments and the SIO/State Investment Board (SIB)
    ii. PERS investment function moved to newly created SIB
    iii. RIO created by combining SIO and TFFR combined

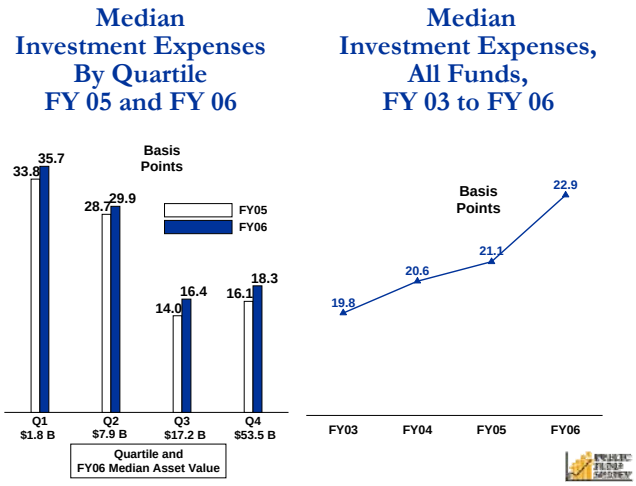
2. The reason for creating the new investment process was:
    a. **Administrative savings** (one investment officer instead of two).
    b. **Expertise** (may be able to have expanded expertise).
    c. **Focus** (instead of one board doing both program administration and money manager hiring/monitoring having two boards would allow them to specialize more in the respective tasks).
    d. **Money manager costs** (this was the most significant financial reason). At that time investment fees were about 32.5 Bp and potential savings were identified from lower manager fees that could be achieved by the reorganization.
    e. **Diversification –** it was felt that combining the funds for investment purposes may provide additional opportunities for diversification.
3. The committee reviewed the recent history of investment expenses:

7/98	$998,948,392	$3,025,600	0.303%
7/99	$1,105,445,266	$3,785,694	0.342%
7/00	$1,194,453,950	$4,776,689	0.400%
7/01	$1,134,178,963	$5,443,257	0.480%
7/02	$1,047,390,027	$5,854,357	0.559%
7/03	$1,092,838,721	$7,237,947	0.662%
7/04	$1,266,962,283	$8,595,780	0.678%
7/05	$1,433,006,393	$10,351,497	0.722%
7/06	$1,587,240,087	$18,145,383	1.143%
7/07	$1,878,924,867	$13,071,278	0.696%

It was noted that investment expenses have increased over time. The committee also reviewed the 2008 investment expenses which were approximately $14 million and the following was observed:

- That it required a 2% employer/employee contribution for the year to support this cost.
- The PERS annual employer/employee contributions are 8.12%.
- That it took about 25% of our annual contributions to support the investment function.

4. The committee also reviewed information on investment expenses for other public funds:



It was noted that our investment expenses are above the median and if our expenses were near the median it would be equal to a 1% increase in our employer/employee contributions.

5. Information on the investment performance was also reviewed:

	Year Ending 6/30/07	Year Ending 6/30/06	Year Ending 6/30/05	Year Ending 6/30/04	Year Ending 6/30/03	Year Ending 6/30/02	Year Ending 6/30/01
10th Percentile	19.21	12.83	12.43	19.85	6.19	(2.38)	(0.55)
25th Percentile	18.48	12.19	11.27	17.47	5.05	(4.06)	(2.92)
Median	**17.57**	**11.76**	**10.27**	**15.86**	**3.88**	**(5.48)**	**(5.39)**
75th Percentile	16.65	10.66	9.13	14.58	3.04	(6.43)	(6.75)
90th Percentile	15.31	8.73	7.83	12.23	2.12	(8.57)	(8.31)
	19.63	12.04	14.17	16.65	5.19	-6.94	-4.47

As the above shows, our investment performance has been better then the median for all but one year which has very positively contributed to the funded status of the plan.

6. The committee requested information from CEM which provides a perspective on value added by the additional investment expenses compared to the additional return and compares that to other public funds. This information was requested for the 5 and 10 year periods.

Your 5-year cost effectiveness versus CEM's global participants. You had higher than average costs and had high value added.

* Your 5-year Net implementation value added of 1.0% equals your 1.8% gross impl. value added minus your 0.8% actual cost.

- Page 3
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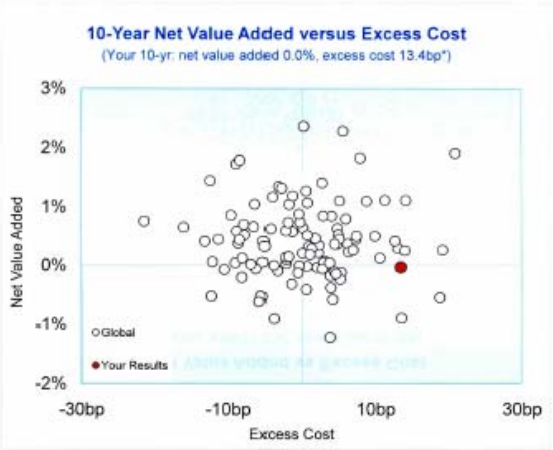
Your 10-year cost effectiveness versus CEM's global participants. You had higher than average costs with close to 0% value added.



* Your 10-year net value added of 0.0% equals your 0.6% year gross value added minus your 0.6% 10-year average cost.
Your 10-year excess cost of 13.4bp is the average of your excess cost for the past 10 years.

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7. The committee also reviewed information on the funded status of PERS which noted that with the substantial downturn in the market and our returns the fund will need a substantial increase in employer or employee contributions and/or reductions in the plans benefits.

Observations

1. That the State Investment Board has done a sound job in obtaining additional alpha.
2. That PERS needs to have strong returns in excess of 8% for the fund to offset the recent losses.
3. That our investment costs have risen considerably in terms of basis points (from 32 Bp to over 70 Bp) and in percent of contribution (from 5% in 1989 to 25% in 2008).
4. That if the fund could obtain the same strong returns at a lower over investment cost, it could considerably help the plans funded status (2% of employee/employee contributions are required to support the investment expenses and if this was reduced to 1.5% it would be the equivalent of a .5% contribution increase) and reduce that amount of increase in employer/employee contributions and/or reduced benefits.

Conclusions and Recommendations

1. That the PERS Board is responsible under the NDCC to establish its investment policies.
2. That our present policies do not speak directly to investment fees and therefore does not provide any advice to the SIB on this topic.
3. That our policies should be updated to provide that advice to the SIB and include
    a. Statement on our goals relating to fees and return (see Attachment #1 – page 4)
    b. Set a goal and method to gain a perspective on the issue (use the CEM benchmarking as the method for that perspective – page 4).
    c. Establish a regular review of the fees in our annual review (see Attachment #1 – page 6)
    d. Transmit this memo to the SIB for their information relating to the PERS Boards considerations.
4. That the PERS Investment Committee and Executive Director should meet with the SIB chair and Steve to review the above.

STATEMENT OF
INVESTMENT GOALS, OBJECTIVES AND POLICIES
FOR THE
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM

1. PLAN CHARACTERISTICS AND FUND CONSTRAINTS

The North Dakota Public Employees Retirement System (NDPERS) and the Highway Patrol Retirement System (HPRS) are pension benefit plans established to provide retirement income to state employees and employees of participating political subdivisions. The plans are administered by a seven member Board of Trustees (the Board). The Chair is appointed by the governor, three members are elected by the active members of the plans, one member is elected by the retired members, one is appointed by the Attorney General and the seventh member is the State Health Officer or their designee.

The NDPERS plan is a multi-employer hybrid benefit public pension plan that provides retirement benefits, disability retirement benefits, and survivor benefits, in accordance with Chapter 54-52 of the North Dakota Century Code (NDCC). Monthly retirement benefits for the Main, National Guard and Law Enforcement Plans are based on the formula: number of Years of Service times 2.0% times the final average salary. For the NDPERS Judges Plan the retirement formula is: for the first ten years of service of the formula is final average salary times 3.5%, for the second ten years of service the formula is final average salary times 2.80% and for all remaining years of service the formula is final average salary times 1.25%.

The Highway Patrol plan is a single employer plan that provides retirement benefits, disability benefits, and survivor benefits in accordance with Chapter 39-03.1 of the North Dakota Century Code. Monthly retirement benefits are based upon on the formula: first 25 years of credit service times 3.25% and all remaining years of service times 1.75%.

Funding for the NDPERS plan is provided by monthly employee contributions and employer contributions with the amount varying based upon which NDPERS plan the member participates in. For the Main NDPERS plan the employee contribution is 4% and the employer contribution is 4.12%, for the Judges Plan the employee contribution is 5% and employer contribution is 14.52%, for the National Guard Plan the employee contribution is 4% and employer contribution is 6.5%, for the Law Enforcement Plan with prior service the employee contribution is 4% and the employer contribution is 8.31% and for the Law Enforcement Plan without prior service the employee contribution rate is 4% and the employer rate is 6.43%.

Funding for the Highway Patrol plan is provided by a monthly employee contribution of 10.3% and an employer contribution of 16.7%

Each year the Board has an actuarial valuation performed. The current actuarial assumed rate of return on assets for all plans is 8%.

2. RESPONSIBILITIES AND DISCRETION OF THE STATE INVESTMENT BOARD (SIB)

Aggregate plan contributions plus earnings, minus allowable expenses constitute the Fund. The Board is charged by NDCC chapters 54-52, 21-10-01, and 39-03.1 to establish policies for the investment goals and asset allocation of the Fund. The State Investment Board (SIB) is charged with implementing the asset allocation as promptly and prudently as possible in accordance with the Board's policies by investing the assets of the Fund in the manner provided in the prudent investor rule, which provides:

Fund fiduciaries shall exercise the judgment and care, under the circumstances then prevailing, that an institutional investor of ordinary prudence, discretion, and intelligence exercises in the management of large investments entrusted to it, not in regard to speculation but in regard to the permanent disposition of funds, considering probable safety of capital as well as probable income. The retirement funds belonging to the teachers' fund for retirement and the public employees retirement system must be invested exclusively for the benefit of their members and in accordance with the respective funds' investment goals and objectives. (NDCC 21-10-07)

The SIB may delegate investment responsibility of the Fund or any portion of the Fund to professional money managers. Where a money manger has been retained, the SIB's role in determining investment strategy is supervisory not advisory.

The SIB may at its discretion, pool the assets of the Fund with another fund or funds having similar investment objectives and time horizons in order to maximize returns and minimize costs. In pooling fund assets the SIB will establish asset class pools it deems necessary to achieve the specific quality, diversification, restrictions, and performance objectives subject to the prudent investor rule and the objectives of the funds participating in the pools.

The SIB is responsible for establishing the selection criteria, determining the performance measures, and retaining all fund money managers. SIB is also responsible for the selection and retention of any investment consultants that may be employed in the investment of the Fund assets.

3. DELEGATION OF AUTHORITY

Management responsibility for NDPERS funds not assigned to the North Dakota State Investment Board (SIB) in Chapter 21-10 of the North Dakota Century Code (NDCC) is hereby delegated to the SIB, which must establish written policies and procedures for the operation of the NDPERS funds, consistent with this investment policy.

Such procedures must provide for:

1. The definition and assignment of duties and responsibilities to advisory services and persons employed by the SIB pursuant to NDCC 21-10-02.1(1) (a).

2. Investment diversification, investment quality, qualification of money managers, and amounts to be invested by money managers pursuant to NDCC 21-10-02.1(1)(e). In developing these policies it is understood:

    a. Futures and options may be used to hedge or replicate underlying index exposure, but not for speculation.

b. The use of derivatives will be monitored to ensure that undue risks are not taken by the money managers.

c. All assets must be held in custody by the SIB's master custodian or such other custodians as are selected by the SIB.

3. Guidelines for the selection and redemption of investments will be in accordance with NDCC 21-10-02.1(1) (d).

4. The criteria for making decisions with respect to hiring, retention, and termination of money managers will be clearly defined. This also includes selecting performance measurement standards, consultants, report formats, and frequency of meetings with money managers.

All participants in the investment process must seek to act responsibly as custodians of the public trust.

4. INVESTMENT GOALS

The investment goals of the Fund have been established by the NDPERS Board based upon consideration of the Board's strategic objectives and a comprehensive review of the current and projected financial requirements. These goals are to be viewed over the long term.

Goal #1 Accumulate sufficient wealth through a diversified portfolio of investments which will enable the State of North Dakota to pay all current and future retirement benefits and expense obligations of the Fund.

Goal #2 To obtain an investment return in excess of that needed to allow for increases in a retiree's annuity to maintain the purchasing power of their retirement benefit.

5. INVESTMENT PERFORMANCE OBJECTIVE

The NDPERS Board will seek to make investments that generate sufficient return to meet the goals outlined in this policy. The objectives established in this section are in accordance with the fiduciary requirement in federal and state law.

It is in the best interest of NDPERS and its beneficiaries that performance objectives be established for the total Fund. It is clearly understood these objectives are to be viewed over the long term and have been established after full consideration of all factors set forth in this Statement of Investment Goals, Objectives and Policies.

a. The funds rate of return, over the long term should equal, that of the policy portfolio which is comprised of policy weights of appropriate asset class benchmarks as set by the SIB.

b. The annual standard deviation of total returns for the Fund should not exceed that of the policy portfolio.

c. Over 10-year and longer periods the fund should match or exceed the expected rate of return projected in the most recent asset/liability study without exceeding the expected risk

for the period as measured by standard deviation.

6. INVESTMENT FEES

PERS annual operational costs are composed of expenses for administration and investments. Seven percent (7%) of our annual operational costs are related to administration and 93% to investments. Investment costs are our single largest annual expense. Viewed from a different perspective 25% of our annual employer/employee contributions (2% of our 8.12% contribution) are required to pay our annual investments expenses.

The PERS Board understands that in implementing the asset allocation in this policy that it is necessary to utilize strategies that will enhance the overall return for the fund. We recognize these strategies have a cost. Therefore PERS is requesting that in implementing this asset allocation that the State Investment Board seek to maximize return within the scope of these policies while limiting our investment costs. To measure this PERS will ask as part of the annual review for information from CEM showing the value added vs. costs. PERS would suggest that the optimal position would be to have our performance in the upper left quadrant over a five and ten year period.

7. ASSET ALLOCATION

In recognition of the plan's performance objectives, benefit projections, and capital market expectations, the NDPERS Board has established the following asset allocation:

Date of Last Asset Allocation Study: NDPERS Board Approved December 2005 – SEI Corporation

Domestic Equities - Large Cap	30%
Domestic Equities – Small Cap	10%
International Equities	10%
Emerging Markets Equities	5%
Domestic Fixed Income	24%
High Yield Fixed Income	5%
International Fixed Income	5%
Real Estate	5%
Private Equity	5%
Cash	1%
Expected Return	9.3%
Standard Deviation of Returns	10.5%

Rebalancing of the Fund to this target will be done in accordance with the SIB's rebalancing policy, but not less than annually.

8. RESTRICTIONS

A. Futures and options may be used to hedge or replicate underlying index exposure, but not for speculation.

B. Use of derivatives will be monitored to ensure that undue risks are not taken by the money managers

C. No transaction may be made which threatens the tax exempt status of the Fund.

D. No unhedged short sales or speculative margin purchases may be made.

Social Investing is defined as *"The investment or commitment of public pension fund money for the purpose of obtaining an effect other than a maximized return to the intended beneficiaries."*

E. Social investing is prohibited unless it meets the Exclusive Benefit Rule and it can be substantiated that the investment must provide an equivalent or superior rate of return for a similar investment with a similar time horizon and similar risk.

Economically targeted investing is defined as an investment designed to produce a competitive rate of return commensurate with risk involved, as well as to create collateral economic benefits for a targeted geographic area, group of people, or sector of the economy.

F. Economically targeted investing is prohibited unless the investment meets the Exclusive Benefit Rule.

The Exclusive Benefit Rule is met if the following four conditions are satisfied:

(1) The cost does not exceed the fair market value at the time of investment.

(2) The investment provides the Fund with an equivalent or superior rate of return for a similar investment with a similar time horizon and similar risk.

(3) Sufficient liquidity is maintained in the Fund to permit distributions in accordance with the terms of the plan.

(4) The safeguards and diversity that a prudent investor would adhere to are present.

G. Publicly Traded REITs may not be used in the Real Estate asset allocation.

H.. Where timberland is used as part of the domestic fixed income portfolio, it may not make up more than 30% of the total asset class at the time of initial purchase. If timberland becomes 50% or more of the domestic fixed income portfolio through market

appreciation, the SIB must review the situation and, with the goal of bringing the timberland portion of the domestic fixed income portfolio into line with this restriction and considering market conditions at the time take any action deemed prudent.

.

Where investment characteristics, including yield, risk, and liquidity are equivalent, the Board's policy favors investments which will have a positive impact on the economy of North Dakota.

9. INTERNAL CONTROLS

The SIB must have a system of internal controls to prevent losses of public funds arising from fraud or employee error. The controls deemed most important are the separation of responsibilities for investment purchases from the recording of investment activity, custodial safekeeping, written confirmation of investment transactions, and established criteria for broker relationships. The annual financial audit must include a comprehensive review of the portfolio, accounting procedures for security transactions and compliance with the investment policy.

10. EVALUATION

Investment management of the Fund will be evaluated against the Fund's investment objectives and investment performance standards.

An annual performance report must be provided to the Board by the State Investment Officer at a regularly scheduled NDPERS Board meeting. The annual performance report must include asset returns and allocation data as well as information regarding all significant or material matters and changes pertaining to the investment of the Fund, including:

- Changes in asset class portfolio structures, tactical approaches and market values;
- All pertinent legal or legislative proceedings affecting the SIB.
- Compliance with these investment goals, objectives and policies.
- A general market overview and market expectations.
- A Review of fund progress and its asset allocation strategy.
- A report on investment fees and the SIB's effort relating section 6. As part of this report the data from CEM referenced above shall also be reviewed with the PERS Board.

In addition, the State Investment Officer shall review with the Board the procedures and policies established by the SIB relating to this statement of investment goals, objectives, and policies.

Date: _____ Date: _____

_____ _____

J. Sparb Collins
Executive Director
North Dakota Public Employees Retirement System

Steve Cochrane, CFA
Executive Director
North Dakota Retirement and Investment Office

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Memorandum

TO: PERS Board

FROM: Sparb

DATE: July 9, 2009

SUBJECT: BCBS Agreement

Attached please find the BCBS agreement for your approval. At the last meeting the draft was presented for your consideration. Comments were solicited and staff continued its review. No changes were made to the draft since the June meeting. At this meeting the contract is before you for final approval.

Also please note the NDCC requires that the agreement be signed by the chair so the Board should also authorize him to sign the contract.

Board Action Requested

Approve the agreement with BCBS for 2009-2011.

ADMINISTRATIVE SERVICE AGREEMENT

This Administrative Service Agreement ("Agreement") is entered into between North Dakota Public Employees Retirement System (NDPERS) ("the Plan Sponsor"), North Dakota Public Employees Retirement System (NDPERS) ("the Plan Administrator") and Blue Cross Blue Shield of North Dakota ("BCBSND"), the terms of which are as follows:

The Plan Sponsor has established and maintains a fully insured group health plan (the Plan) which provides, among other things, various benefits to Members in the Plan, as set forth in the Certificate of Insurance provided to plan Members. The Plan Administrator is the administrator of the Plan established through this Agreement.

In consideration of payment of required premium and acceptance of membership applications, BCBSND enters into this Agreement with the Plan Sponsor and the Plan Administrator. BCBSND agrees to provide plan Members the benefits set forth in the Certificate of Insurance, in accordance with its terms and conditions. This Agreement also includes the Certificate of Insurance, membership applications, Identification Cards, Benefit Plan Attachments and any endorsements, supplements, attachments, addenda or amendments.

1. **EFFECTIVE DATE:**

This agreement is effective July 1, 2009 through June 30, 2011, unless terminated as provided.

2. **DEFINITIONS**

This section defines the terms used in this Agreement. These terms will be capitalized throughout this Agreement when referred to in the context defined.

A. **BENEFIT PAYMENTS** - payments of benefits under the Plan.

B. **CERTIFICATE OF CREDITABLE COVERAGE** - a certificate disclosing information relating to an individual's creditable coverage under a health care benefit program for purposes of reducing any preexisting condition waiting period imposed by any group health plan coverage.

C. **CLAIM** - notification in a form acceptable to BCBSND that service has been provided or furnished to a Member.

D. **DRG** - shall mean diagnostic related groups.

E. **DATA AGGREGATION** - the combining of Protected Health Information that BCBSND creates or receives for or from the Plan and for or from other health plans or health care providers for which BCBSND is acting as a business associate to permit data analyses that relate to the Health Care Operations of the Plan and those other health plans or providers.

F. **FEES AND CHARGES** - the amounts the Plan Administrator must pay BCBSND for the administrative services described in Section 6. FEES AND CHARGES.

G. **HEALTH CARE OPERATIONS** - any of the activities of a health plan to the extent the activities relate to functions that make it a health plan.

H. **HEALTH CARE PROVIDER** - any eligible provider that has provided care, diagnosis, or treatment to or for a Member for which benefits are sought under the Plan.

I. **INELIGIBLE PERSON** - any person, firm, or corporation that has received benefits or on whose behalf benefits have been paid but for whom benefits are not payable under the terms of the Plan.

J. **MEMBER** - the Subscriber and any dependent of a Subscriber or any other person designated by a Subscriber or by the terms of the Plan who is or may become entitled to a benefit under the Plan. The term shall also include any proprietor, partner, or owner of the Plan Sponsor, if any, who is designated by the terms of the Plan who is or may become entitled to a benefit under the Plan. In no case shall the term Member include any person not otherwise entitled to coverage under the terms of the Plan.

For the purposes of determining the various benefits and restrictions or other limitations thereto made available to a Member under the terms of this Agreement, all benefits under any Plan option or tier (and any restrictions or other limitations thereto) made available to or received by a Member shall accumulate toward that Member's benefits and any restrictions and other limitations thereto.

K. **PAYMENT** - activities undertaken to obtain premiums, determine or fulfill coverage and benefits, or obtain or provide reimbursement for health care services.

L. **PLAN ADMINISTRATOR** - **NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM.** North Dakota Public Employees Retirement System (NDPERS) is the administrator of the Plan, with all of the duties and responsibilities applicable to plan administrators, including but not necessarily limited to compliance with any and all administrative, reporting, and disclosure requirements. BCBSND is not the Plan Sponsor or the Plan Administrator of the Plan and is not responsible for any of the duties assigned to the Plan Sponsor or the Plan Administrator by the terms of the Plan, or by this Agreement.

M. **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

1. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
2. relates to a Member’s past, present or future physical or mental health or condition;
3. relates to the provision of health care to a Member;
4. relates to the past, present, or future payment for health care to or on behalf of a member; or
5. identifies a Member or could reasonably be used to identify a Member.

Educational records and employment records are not considered PHI under federal law.

N. **SECURITY INCIDENT** - any attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems.

O. **STANDARD TRANSACTIONS** - health care financial or administrative transactions conducted electronically for which standard data elements, code sets and formats have been adopted in accordance with federal or state law.

P. **SUBSCRIBER** - any employee of the Plan Sponsor who is or may become eligible to receive a benefit under the Plan. The term includes all common law employees and possibly proprietors, partners, or other owners who work for the Plan Sponsor and are otherwise entitled to coverage under the Plan. Notwithstanding the above, in no case shall the term Subscriber include any person not otherwise entitled to coverage under the terms of the Plan.

Q. **SUCCESSFUL SECURITY INCIDENTS** - Security Incidents that result in unauthorized access, use, disclosure, modification or destruction of information or interference with system operations.

R. **UNSUCCESSFUL SECURITY INCIDENTS** - Security Incidents that do not result in unauthorized access, use, disclosure, modification or destruction of information or interference with system operations.

3. **BCBSND SHALL:**

3.1 Establish a membership record for existing Members containing information as provided by NDPERS.

3.2 Provide Identification Cards, Certificates of Insurance/Summary Plan Descriptions and applications for enrollment for each Subscriber.

3.3 Upon enrollment under the NDPERS Benefit Plan, BCBSND will provide written notice to covered employees and their covered spouses of their continuation rights pursuant to the Consolidated Omnibus Budget Reconciliation Act. ("COBRA").

3.4 Receive applications for enrollment for late entrants.

3.5 Provide Managed Benefits services in accordance with appropriate licensure and certification requirements including a dedicated staff person.

3.6 Provide a dedicated service unit to adjudicate all claims and respond to Member's inquiries. Provide toll-free Member and Health Care Provider service lines between the hours of 8 AM and 5:00 PM CST or CDT at the home office in Fargo, ND, as appropriate. A toll-free managed benefits line for Health Care Providers will also be available between the hours of 7:30 AM and 5:30 PM CST or CDT. During nonbusiness hours, answering machine services will be available for managed benefits calls.

3.7 Process claims and inquiries per MTM (Member Touchpoint Measures) for Non-BlueCard claims.

3.8 Correspond with the Members and Health Care Providers if additional information is deemed necessary by BCBSND to complete the administrative process.

3.9 Administer other party liability programs.

3.10 Provide to Members an Explanation of Benefits Statement.

3.11 Provide a procedure for detection of fraud and unlawful activity.

3.12 Provide to Members a conversion policy when application is made within 31 days of the termination of enrollment under NDPERS.

3.13 Provide assistance to NDPERS for the conduct of enrollment, servicing and education.

3.14 Provide to NDPERS formal Policy and Procedure guidelines for the conduct of external audits or reviews commissioned by NDPERS.

NDPERS shall provide BCBSND with the scope and requirements of any audit or review prior to the commencement of activities. If a sample of claims is required, BCBSND will provide or NDPERS will select a statistically valid computerized sample of claims, if not prohibited by law, regulation or rule.

NDPERS will provide a copy of the report of all audit or review findings and shall discuss the findings with BCBSND upon discovery to allow further investigation or implementation of corrective action.

3.15 Provide NDPERS with reporting to include but not limited to:

a. Annual group reporting of membership and utilization by group segments and product.

b. Estimates of future claim reserves and premium to claim ratio.

c. Such other special claims reports as requested from time-to-time by NDPERS, subject to the availability of data and appropriate cost considerations.

d. Interest calculation monthly report.

e. Semi-annual performance objectives as outlined in section 2 of the BCBSND response to question 15 of the RFP.

3.16 Provide NDPERS with claims specific data on a monthly basis on compact disc or other agreed upon medium. This information shall be in a format acceptable to NDPERS and subject to all federal and state laws on confidentiality and open records.

3.17 Provide support to NDPERS for the establishment of a Preferred Provider Network consistent with objectives established by NDPERS.

a. BCBSND will provide technical and administrative advice to NDPERS relative to the appropriateness of PPO arrangements compared to existing Blue Cross Blue Shield participation and reimbursement arrangements, to verify that PPO arrangements provide for payments which are no greater than the existing arrangements. BCBSND will provide current information regarding Blue Cross Blue Shield participation and reimbursement arrangements in place on a provider-specific basis for comparative purposes.

b. BCBSND will develop jointly with NDPERS a written instrument to be used as the basis for providers participating in the PPO Program.

c. BCBSND will secure provider agreements upon completion of negotiations with providers. Such negotiations will be conducted jointly by BCBSND and NDPERS.

d. BCBSND will enforce strict managed benefits, utilization review and quality assurance criteria to assure attainment of Preferred Provider program objectives.

e. BCBSND will, upon NDPERS direction, terminate a Provider's NDPERS PPO participation agreement in accordance with terms of the agreement, when a PPO Provider is noncompliant with NDPERS policies and procedures. Said policies and procedures shall be documented and communicated to the participating provider prior to implementation.

3.18 Carry over any Deductible and/or Coinsurance Amounts incurred from January 1 to June 30, of the prior contract period.

4. **NDPERS SHALL:**

4.1 Prepare and distribute monthly billings to participating employers and retirees participating in the Plan. NDPERS shall respond to the participating employers inquiries concerning eligibility rules, billing, etc.

4.2 Prepare monthly eligibility tape by participating employer and premium classification for both active and retired employees and provide the tape to BCBSND to be used for eligibility certification purposes. Along with the eligibility tape, NDPERS will furnish a monthly listing of participants added or terminated during the month. Such listing will reflect the name of the employee, dependents, Social Security Number, the effective date of coverage for a new employee or the termination date of a terminated employee and the coverage classification.

4.3 Provide enrollment forms, obtain completed classifications or addresses, etc. from participants and furnish BCBSND with a copy of the enrollment forms or request for coverage or address changes and retain the original copy. Enrollment forms will include the NDPERS and Blue Cross Blue Shield Service Marks.

4.4 Be responsible for the administration of and compliance with COBRA. BCBSND will forward requests for COBRA participation by membership to NDPERS upon notification.

4.5 Comply with BCBSND's established administrative policies which are reasonable and consistent with the NDPERS Health Plan and the bid specifications agreed to by the parties, including but not limited to: underwriting policies, standard adjudication and Medical Policy Guidelines, Payable Provider Guidelines, Managed Benefits Program Guidelines and claim payment procedures.

4.6 Develop and provide BCBSND the objectives established for the Preferred Provider programs.

4.7 Assume joint responsibility for the determination of provider eligibility and performance criteria in the Preferred Provider programs.

4.8 Be responsible for any systems redesign costs to BCBSND which result from the implementation of any new reimbursement mechanisms not presently in place within BCBSND automated claims payment systems. Those reimbursement mechanisms currently in place include:

Institutional	Professional
Percent of Billed Charges	Percent of Physician Payment Schedule
Percent of DRGs	Percent of Billed Charges
Percent of Per Diems	Capitation
Targeted Cost per Member	Targeted Cost per Member

4.9 Pay premiums to BCBSND according to the schedule in Section 6.

5. PRIVACY USE AND DISCLOSURE RESPONSIBILITIES

5.1 RESPONSIBILITIES OF BCBSND

A. Privacy of Protected Health Information (PHI)

1. BCBSND will keep confidential all Claim records and all other PHI that BCBSND creates or receives in the performance of its duties under this Agreement. Except as permitted or required by this Agreement for BCBSND to perform its duties under this Agreement, BCBSND will not use or disclose such Claim information or other PHI without the authorization of the Member who is the subject of such information or as required by law.

2. BCBSND will neither use nor disclose Members' PHI (including any Members' PHI received from a business associate of the Plan) except (1) as permitted or required by this Agreement, (2) as permitted in writing by the Plan Administrator, (3) as authorized by Members, or (4) as required by law.

3. BCBSND will be permitted to use or disclose Members' PHI only as follows:

   a. BCBSND will be permitted to use and disclose Members' PHI (a) for the management, operation and administration of the Plan the Plan Administrator offers Members, and (b) for the services set forth in the Plan, which include Payment activities, Health Care Operations, and Data Aggregation as these terms are defined under federal law.

1. BCBSND will be permitted to use Members' PHI as necessary for BCBSND proper management and administration or to carry out BCBSND's legal responsibilities.

2. BCBSND will be permitted to disclose Members' PHI as necessary for BCBSND's proper management and administration or to carry out BCBSND's legal responsibilities only if (i) the disclosure is required by law, or (ii) before the disclosure, BCBSND obtains from the entity to which the disclosure is to be made reasonable assurance, evidenced by a written contract, that the entity will hold Members' PHI in confidence, use or further disclose Members' PHI only for the purposes for which BCBSND disclosed it to the entity or as required by law, and notify BCBSND of any instance the entity becomes aware of where the confidentiality of any Members' PHI was breached.

b. BCBSND will make reasonable efforts to use, disclose, or request only the minimum necessary amount of Members' PHI to accomplish the intended purpose.

4. Other than disclosures permitted by Section 5.1(A)3, BCBSND will not disclose Members' PHI to the Plan Administrator or to the Plan's business associate except as directed by the Plan Administrator in writing.

5. BCBSND will require each subcontractor and agent to which BCBSND is permitted by this Agreement or in writing by the Plan Administrator to disclose Members' PHI to provide reasonable assurance, evidenced by written contract, that such other entity will comply with the same privacy and security obligations with respect to Members' PHI as this Agreement applies to BCBSND.

6. BCBSND will not disclose any Members' PHI to the Plan Sponsor, except as permitted by and in accordance with Section 5.1(A)3.

7. BCBSND will report to the Plan Administrator any use or disclosure of Members' PHI not permitted by this Agreement. BCBSND will make any such report to the Plan Administrator after BCBSND learns of such non-permitted use or disclosure.

8. BCBSND will report to the Plan Administrator attempted or successful unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with BCBSND's system operations in BCBSND's information systems ("Security Incident"), of which BCBSND becomes aware. With regard to attempted unauthorized access, use, etc., BCBSND and the Plan Administrator recognize and agree that the significant number of meaningless attempts to, without authorization, access, use, disclose, modify or destroy electronic PHI will make real-time reporting formidable. Therefore, BCBSND and the Plan Administrator agree to the following reporting procedures for Security Incidents that result in unauthorized access, use, disclosure, modification or destruction of information or interference with system operations ("Successful Security Incidents") and for Security Incidents that do not so result ("Unsuccessful Security Incidents").

For Unsuccessful Security Incidents, BCBSND and the Plan Administrator agree that this Agreement constitutes notice from BCBSND of any such Unsuccessful Security Incidents. In other words, the Plan Administrator waives any separate notice of Unsuccessful Security Incidents. By way of example, BCBSND and the Plan Administrator consider the following to be illustrative of Unsuccessful Security Incidents when they do not result in unauthorized access, use, disclosure, modification, or destruction of a Member's electronic PHI or interference with an information system:

1. Pings on BCBSND's firewall,
2. Port scans,
3. Attempts to log on to a system or enter a database with an invalid password or username,
4. Denial-of-service attacks that do not result in a server being taken off-line, and
5. Malware (e.g., worms, viruses).

For Successful Security Incidents, BCBSND shall give notice promptly to the Plan Administrator in the event a Member's electronic PHI was compromised.

9. Disposition of Protected Health Information

The parties agree that upon termination, cancellation, expiration or other conclusion of this Agreement, BCBSND will return or destroy all PHI received or created by BCBSND on the Plan Administrator's behalf as soon as feasible. Due to various regulatory and legal requirements, the Plan Administrator acknowledges that immediate return or destruction of all such information is not feasible. BCBSND agrees that upon conclusion of this Agreement for any reason, it will use or disclose the PHI it received or created on the Plan's behalf only as necessary to meet BCBSND's regulatory and legal requirements and for no other purposes unless permitted in writing by the Plan Administrator. BCBSND will destroy PHI received or created by BCBSND on the Plan Administrator's behalf that is in BCBSND's possession under such circumstances and upon such schedule as BCBSND deems consistent with its regulatory and other legal obligations.

These responsibilities agreed to by BCBSND and related to protecting the privacy and safeguarding the security of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and, where applicable, shall govern BCBSND's receipt, use or disclosure of PHI pursuant to the terms of this Agreement.

B. **Access, Amendment and Disclosure Accounting for Protected Health Information**

1. Upon the Plan Administrator's written request, BCBSND will make available for inspection and obtaining copies by the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), any PHI about the Member created or received for or from the Plan Administrator in BCBSND's custody or control so the Plan Administrator may meet its access obligations under federal law.

2. Upon receipt of a written request from the Plan Administrator, or at the Plan Administrator's direction by the Member (or the Members' representative), BCBSND will amend or permit the Plan Administrator access to amend any portion of the PHI created or received for or from the Plan Administrator in BCBSND's custody or control, so the Plan Administrator may meet its amendment obligations under federal law.

3. So the Plan Administrator may meet its disclosure accounting obligations under federal law, BCBSND will do the following:

   a. BCBSND will record each disclosure of Members' PHI which is not excepted from disclosure accounting under Section 5.1(B)3.b that BCBSND makes to the Plan Administrator or to a third party.

      The information about each disclosure that BCBSND must record ("Disclosure Information") is (i) the disclosure date, (ii) the name and (if known) address of the person or entity to whom BCBSND made the disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the disclosure.

      For repetitive disclosures of Members' PHI that BCBSND makes for a single purpose to the same person or entity (including the Plan Administrator), BCBSND may record (i) the disclosure information for the first of these repetitive disclosures, (ii) the frequency, periodicity or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures.

   b. BCBSND will not be required to record disclosure information or otherwise account for disclosures of Members' PHI that this Agreement or the Plan Administrator in writing permits or requires:
      (1) for Payment activities or Health Care Operations,
      (2) to the Member who is the subject of the PHI or to that Members' personal representative,
      (3) to persons involved in that Members' health care or payment for health care, as provided under federal law,
      (4) for notification for disaster relief purposes or national security or intelligence purposes as provided under federal law,
      (5) to law enforcement officials or correctional institutions regarding inmates,
      (6) for incidental uses or disclosures,
      (7) as part of a limited data set in accordance with federal law,
      (8) that occurred prior to the HIPAA Privacy Compliance Date,
      (9) pursuant to a valid authorization.

   c. BCBSND will have available for the Plan Administrator the disclosure information required by Section 5.1(B)3.a. for the six (6) years immediately preceding the date of the Plan Administrator's request for the disclosure information.

   d. Upon the Plan Administrator's written request, BCBSND will make available to the Plan Administrator, or at the Plan Administrator's direction to the Member (or the Member's representative), disclosure information regarding the Member, so the Plan Administrator may meet its disclosure accounting obligations under federal law.

C. **Information Safeguards**

1. BCBSND will maintain reasonable and appropriate administrative, technical and physical safeguards to protect the privacy of Member PHI. The safeguards must reasonably protect Member PHI from any intentional or unintentional use or disclosure in violation of federal law and limit incidental uses or disclosures made pursuant to a use or disclosure otherwise permitted by this Agreement.

2. BCBSND will implement administrative, technical, and physical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI BCBSND creates, receives, maintains, or transmits on behalf of the Plan Administrator as required by federal law.

D. **Inspection of Books and Records**

BCBSND will make its internal practices, books, and records relating to its use and disclosure of PHI created or received for or from the Plan Administrator available to the Plan Administrator and to the U.S. Department of Health and Human Services to determine compliance with federal law or this Agreement.

E. BCBSND will prepare and distribute a notice of privacy practices appropriate for the Plan to meet its notice obligations under federal law. The Plan Administrator authorizes BCBSND to disclose the minimum necessary PHI to the Plan Sponsor for plan administration functions specified in the Plan documents as amended.

F. **Information Privacy and Safeguard Provisions Survive Termination of Agreement**

These responsibilities agreed to by BCBSND and related to protecting the privacy of PHI, as well as any terms directly related thereto, shall survive the termination of this Agreement and where applicable, shall govern BCBSND's receipt and use of PHI obtained pursuant to the terms of this Agreement.

5.2 **RESPONSIBILITIES OF THE PLAN SPONSOR**

A. The Plan Sponsor retains full and final authority and responsibility for the Plan and its operation. BCBSND is empowered to act on behalf of the Plan only as stated in this Agreement or as mutually agreed in writing by the Plan Sponsor and BCBSND.

B. Except with respect to services provided by BCBSND set forth in this agreement, the Plan Sponsor will have the sole responsibility for and will bear the entire cost of compliance with all federal, state and local laws, rules, and regulations concerning the privacy of PHI, including any licensing, filing, reporting, and disclosure requirements, that may apply to the Plan. BCBSND will have no responsibility for or liability with respect to the Plan's compliance or noncompliance with any applicable federal, state, or local law, rule, or regulation.

C. By executing this Agreement, the Plan Sponsor certifies to BCBSND it has amended the Plan documents to incorporate the provisions required by and under federal law, and agrees to comply with the Plan Administrator's plan documents as amended.

BCBSND may rely on Plan Sponsor's certification and Plan Administrator's written authorization, and will have no obligation to verify (1) that the Plan Administrator's plan documents have been amended to comply with the requirements of Federal law or this Agreement or (2) that the Plan Sponsor is complying with the Plan Administrator's plan document as amended.

6. **FEES AND CHARGES**

6.1 In consideration of the fully insured contract under this Agreement, BCBSND agrees to accept the following provisions and premium rates for the Effective Date of this Agreement.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM
PREMIUM RATE STRUCTURE FOR THE 2009-2011 BIENNIUM

Rate Structure A July 1, 2009 - December 31, 2009		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
							(3)-(4)+(5)		
				(1)-(2)			Total		(6)+(7)
		Total	Less	Total		Medicare	Monthly	Plus	NDPERS
		BCBSND	NDPERS	Premium to	Premium	Part D	Paid to	NDPERS	Billing
Code	Description	Bid	Retention	BCBSND	Buydown	Premium	BCBSND	Retention	Rate

Political Subdivision Rates with Wellness Program										
Active										
1	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$2.80	$424.96
2	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$2.80	$1,026.62
COBRA										
4	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
Political Subdivision Rates w/o Wellness Program										
Active										
1	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$7.04	$429.20
2	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$13.06	$1,036.88
COBRA										
4	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
State Contracts with Wellness Program										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree										
21	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	11	1 Medicare only	$168.16	$2.80	$165.36		$63.70	$229.06	$2.80	$231.86
42	11	2 Medicare only	$333.52	$2.80	$330.72		$127.40	$458.12	$2.80	$460.92
50	11	3 Medicare only	$498.88	$2.80	$496.08		$191.10	$687.18	$2.80	$689.98
51	11	4 Medicare only	$664.24	$2.80	$661.44		$254.80	$916.24	$2.80	$919.04
43	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	$63.70	$557.18	$2.80	$559.98
49	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	$127.40	$786.24	$2.80	$789.04
55	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	$191.10	$1,015.30	$2.80	$1,018.10
44	11	Part A Single	$346.20	$2.80	$343.40	$0.14	$63.70	$406.96	$2.80	$409.76

Rate Structure A (cont'd)
July 1, 2009 - December 31, 2009

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	11	1 Medicare only	$168.16	$2.80	$165.36		$63.70	$229.06	$7.44	$236.50
47	11	2 Medicare only	$333.52	$2.80	$330.72		$127.40	$458.12	$12.02	$470.14
53	11	3 Medicare only	$498.88	$2.80	$496.08		$191.10	$687.18	$16.60	$703.78
54	11	4 Medicare only	$664.24	$2.80	$661.44		$254.80	$916.24	$21.18	$937.42
48	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	$63.70	$557.18	$14.00	$571.18
52	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	$127.40	$786.24	$18.58	$804.82
56	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	$191.10	$1,015.30	$23.16	$1,038.46
Medicare Low Income Subsidy										
41	13	1 Medicare only (1cr)	$168.16	$2.80	$165.36		$33.30	$198.66	$2.80	$201.46
42	13	2 Medicare only (2cr)	$333.52	$2.80	$330.72		$66.60	$397.32	$2.80	$400.12
50	13	3 Medicare only (1cr)	$498.88	$2.80	$496.08		$160.70	$656.78	$2.80	$659.58
51	13	4 Medicare only (1cr)	$664.24	$2.80	$661.44		$224.40	$885.84	$2.80	$888.64
43	13	1 Medicare+Others(1cr)	$496.42	$2.80	$493.62	$0.14	$33.30	$526.78	$2.80	$529.58
49	13	2 Medicare+Others (1cr)	$661.78	$2.80	$658.98	$0.14	$97.00	$755.84	$2.80	$758.64
55	13	3 Medicare+Others (2cr)	$827.14	$2.80	$824.34	$0.14	$130.30	$954.50	$2.80	$957.30
61	13	1 Medicare only (.75cr)	$168.16	$2.80	$165.36		$40.90	$206.26	$2.80	$209.06
71	13	1 Medicare only (.5cr)	$168.16	$2.80	$165.36		$48.50	$213.86	$2.80	$216.66
81	13	1 Medicare only (.25cr)	$168.16	$2.80	$165.36		$56.10	$221.46	$2.80	$224.26
57	13	4 Medicare only (2cr)	$664.24	$2.80	$661.44		$194.00	$855.44	$2.80	$858.24
72	13	2 Medicare only (1cr)	$333.52	$2.80	$330.72		$97.00	$427.72	$2.80	$430.52
Grandfathered Rates										
50	14	3 Medicare only	$354.62	$2.80	$351.82		$191.10	$542.92	$2.80	$545.72
51	14	4 Medicare only	$217.64	$2.80	$214.84		$254.80	$469.64	$2.80	$472.44
49	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	$127.40	$616.24	$2.80	$619.04
55	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	$191.10	$542.96	$2.80	$545.76
Grandfathered Rates COBRA										
53	14	3 Medicare only	$354.62	$2.80	$351.82		$191.10	$542.92	$13.70	$556.62
54	14	4 Medicare only	$217.64	$2.80	$214.84		$254.80	$469.64	$12.24	$481.88
52	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	$127.40	$616.24	$15.18	$631.42
56	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	$191.10	$542.96	$13.72	$556.68
Grandfathered Rates with Medicare Low Income Subsidy										
50	15	3 Medicare only (1cr)	$354.62	$2.80	$351.82		$160.70	$512.52	$2.80	$515.32
57	15	4 Medicare only (2cr)	$217.64	$2.80	$214.84		$194.00	$408.84	$2.80	$411.64

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure A

January 1, 2010 - December 31, 2010

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$2.80	$424.96
2	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$2.80	$1,026.62
COBRA										
4	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
Political Subdivision Rates w/o Wellness Program										
Active										
1	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$7.04	$429.20
2	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$13.06	$1,036.88
COBRA										
4	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
State Contracts with Wellness Program										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree										
21	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	11	1 Medicare only	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
42	11	2 Medicare only	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
50	11	3 Medicare only	$498.88	$2.80	$496.08		TBD	TBD	$2.80	TBD
51	11	4 Medicare only	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
43	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	TBD	TBD	$2.80	TBD
49	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	TBD	TBD	$2.80	TBD
55	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	TBD	TBD	$2.80	TBD
44	11	Part A Single	$346.20	$2.80	$343.40	$0.14	TBD	TBD	$2.80	TBD

Rate Structure A (cont'd)
January 1, 2010 - December 31, 2010

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	11	1 Medicare only	$168.16	$2.80	$165.36		TBD	TBD	TBD	TBD
47	11	2 Medicare only	$333.52	$2.80	$330.72		TBD	TBD	TBD	TBD
53	11	3 Medicare only	$498.88	$2.80	$496.08		TBD	TBD	TBD	TBD
54	11	4 Medicare only	$664.24	$2.80	$661.44		TBD	TBD	TBD	TBD
48	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	TBD	TBD	TBD	TBD
52	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	TBD	TBD	TBD	TBD
56	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	TBD	TBD	TBD	TBD
Medicare Low Income Subsidy										
41	13	1 Medicare only (1cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
42	13	2 Medicare only (2cr)	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
50	13	3 Medicare only (1cr)	$498.88	$2.80	$496.08		TBD	TBD	$2.80	TBD
51	13	4 Medicare only (1cr)	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
43	13	1 Medicare+Others (1cr)	$496.42	$2.80	$493.62	$0.14	TBD	TBD	$2.80	TBD
49	13	2 Medicare+Others (1cr)	$661.78	$2.80	$658.98	$0.14	TBD	TBD	$2.80	TBD
55	13	3 Medicare+Others (2cr)	$827.14	$2.80	$824.34	$0.14	TBD	TBD	$2.80	TBD
61	13	1 Medicare only (.75cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
71	13	1 Medicare only (.5cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
81	13	1 Medicare only (.25cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
57	13	4 Medicare only (2cr)	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
72	13	2 Medicare only (1cr)	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
Grandfathered Rates										
50	14	3 Medicare only	$354.62	$2.80	$351.82		TBD	TBD	$2.80	TBD
51	14	4 Medicare only	$217.64	$2.80	$214.84		TBD	TBD	$2.80	TBD
49	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	TBD	TBD	$2.80	TBD
55	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	TBD	TBD	$2.80	TBD
Grandfathered Rates COBRA										
53	14	3 Medicare only	$354.62	$2.80	$351.82		TBD	TBD	TBD	TBD
54	14	4 Medicare only	$217.64	$2.80	$214.84		TBD	TBD	TBD	TBD
52	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	TBD	TBD	TBD	TBD
56	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	TBD	TBD	TBD	TBD
Grandfathered Rates with Medicare Low Income Subsidy										
50	15	3 Medicare only (1cr)	$354.62	$2.80	$351.82		TBD	TBD	$2.80	TBD
57	15	4 Medicare only (2cr)	$217.64	$2.80	$214.84		TBD	TBD	$2.80	TBD

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure A January 1, 2011 - June 30, 2011			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
					(1)-(2)			(3)-(4)+(5)		(6)+(7)
Code		Description	Total BCBSND Bid	Less NDPERS Retention	Total Premium to BCBSND	Premium Buydown	Medicare Part D Premium	Total Monthly Paid to BCBSND	Plus NDPERS Retention	NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$2.80	$424.96
2	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$2.80	$1,026.62
COBRA										
4	4	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	4	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
Political Subdivision Rates w/o Wellness Program										
Active										
1	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$7.04	$429.20
2	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$13.06	$1,036.88
COBRA										
4	3	Single	$425.10	$2.80	$422.30	$0.14		$422.16	$11.30	$433.46
5	3	Family	$1,026.76	$2.80	$1,023.96	$0.14		$1,023.82	$23.32	$1,047.14
State Contracts with Wellness Program										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree										
21	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	11	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	11	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	11	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	11	1 Medicare only	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
42	11	2 Medicare only	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
50	11	3 Medicare only	$498.88	$2.80	$496.08		TBD	TBD	$2.80	TBD
51	11	4 Medicare only	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
43	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	TBD	TBD	$2.80	TBD
49	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	TBD	TBD	$2.80	TBD
55	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	TBD	TBD	$2.80	TBD
44	11	Part A Single	$346.20	$2.80	$343.40	$0.14	TBD	TBD	$2.80	TBD

Rate Structure A (cont'd)
January 1, 2011 - June 30, 2011

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	11	1 Medicare only	$168.16	$2.80	$165.36		TBD	TBD	TBD	TBD
47	11	2 Medicare only	$333.52	$2.80	$330.72		TBD	TBD	TBD	TBD
53	11	3 Medicare only	$498.88	$2.80	$496.08		TBD	TBD	TBD	TBD
54	11	4 Medicare only	$664.24	$2.80	$661.44		TBD	TBD	TBD	TBD
48	11	1 Medicare+Others	$496.42	$2.80	$493.62	$0.14	TBD	TBD	TBD	TBD
52	11	2 Medicare+Others	$661.78	$2.80	$658.98	$0.14	TBD	TBD	TBD	TBD
56	11	3 Medicare+Others	$827.14	$2.80	$824.34	$0.14	TBD	TBD	TBD	TBD
Medicare Low Income Subsidy										
41	13	1 Medicare only (1cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
42	13	2 Medicare only (2cr)	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
50	13	3 Medicare only (1cr)	$498.88	$2.80	$496.08		TBD	TBD	$2.80	TBD
51	13	4 Medicare only (1cr)	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
43	13	1 Medicare+Others (1cr)	$496.42	$2.80	$493.62	$0.14	TBD	TBD	$2.80	TBD
49	13	2 Medicare+Others (1cr)	$661.78	$2.80	$658.98	$0.14	TBD	TBD	$2.80	TBD
55	13	3 Medicare+Others (2cr)	$827.14	$2.80	$824.34	$0.14	TBD	TBD	$2.80	TBD
61	13	1 Medicare only (.75cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
71	13	1 Medicare only (.5cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
81	13	1 Medicare only (.25cr)	$168.16	$2.80	$165.36		TBD	TBD	$2.80	TBD
57	13	4 Medicare only (2cr)	$664.24	$2.80	$661.44		TBD	TBD	$2.80	TBD
72	13	2 Medicare only (1cr)	$333.52	$2.80	$330.72		TBD	TBD	$2.80	TBD
Grandfathered Rates										
50	14	3 Medicare only	$354.62	$2.80	$351.82		TBD	TBD	$2.80	TBD
51	14	4 Medicare only	$217.64	$2.80	$214.84		TBD	TBD	$2.80	TBD
49	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	TBD	TBD	$2.80	TBD
55	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	TBD	TBD	$2.80	TBD
Grandfathered Rates COBRA										
53	14	3 Medicare only	$354.62	$2.80	$351.82		TBD	TBD	TBD	TBD
54	14	4 Medicare only	$217.64	$2.80	$214.84		TBD	TBD	TBD	TBD
52	14	2 Medicare+Others	$491.78	$2.80	$488.98	$0.14	TBD	TBD	TBD	TBD
56	14	3 Medicare+Others	$354.80	$2.80	$352.00	$0.14	TBD	TBD	TBD	TBD
Grandfathered Rates with Medicare Low Income Subsidy										
50	15	3 Medicare only (1cr)	$354.62	$2.80	$351.82		TBD	TBD	$2.80	TBD
57	15	4 Medicare only (2cr)	$217.64	$2.80	$214.84		TBD	TBD	$2.80	TBD

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure B First Year July 1, 2009 - December 31, 2009			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
					(1)-(2)			(3)-(4)+(5)		(6)+(7)
Code		Description	Total BCBSND Bid	Less NDPERS Retention	Total Premium to BCBSND	Premium Buydown	Medicare Part D Premium	Total Monthly Paid to BCBSND	Plus NDPERS Retention	NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	8	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$2.80	$404.86
2	8	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$2.80	$977.88
COBRA										
4	8	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$10.90	$412.96
5	8	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$22.36	$997.44
Political Subdivision Rates w/o Wellness Program										
Active										
1	7	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$6.84	$408.90
2	7	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$12.58	$987.66
COBRA										
4	7	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$10.90	$412.96
5	7	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$22.36	$997.44
State Contracts with Wellness Program (see Rate Structure 'A')										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program (see Rate Structure 'A')										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree (see Rate Structure 'A')										
21	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	12	1 Medicare only	$165.72	$2.80	$162.92		$63.70	$226.62	$2.80	$229.42
42	12	2 Medicare only	$328.64	$2.80	$325.84		$127.40	$453.24	$2.80	$456.04
50	12	3 Medicare only	$491.56	$2.80	$488.76		$191.10	$679.86	$2.80	$682.66
51	12	4 Medicare only	$654.48	$2.80	$651.68		$254.80	$906.48	$2.80	$909.28
43	12	1 Medicare+Others	$489.10	$2.80	$486.30	$0.14	$63.70	$549.86	$2.80	$552.66
49	12	2 Medicare+Others	$652.02	$2.80	$649.22	$0.14	$127.40	$776.48	$2.80	$779.28
55	12	3 Medicare+Others	$814.94	$2.80	$812.14	$0.14	$191.10	$1,003.10	$2.80	$1,005.90

Rate Structure B
First Year (cont'd)
July 1, 2009 - December 31, 2009

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	12	1 Medicare only	$165.72	$2.80	$162.92		$63.70	$226.62	$7.38	$234.00
47	12	2 Medicare only	$328.64	$2.80	$325.84		$127.40	$453.24	$11.92	$465.16
53	12	3 Medicare only	$491.56	$2.80	$488.76		$191.10	$679.86	$16.44	$696.30
54	12	4 Medicare only	$654.48	$2.80	$651.68		$254.80	$906.48	$20.98	$927.46
48	12	1 Medicare+Others	$489.10	$2.80	$486.30	$0.14	$63.70	$549.86	$13.84	$563.70
52	12	2 Medicare+Others	$652.02	$2.80	$649.22	$0.14	$127.40	$776.48	$18.38	$794.86
56	12	3 Medicare+Others	$814.94	$2.80	$812.14	$0.14	$191.10	$1,003.10	$22.92	$1,026.02

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure B First Year January 1, 2010 - June 30, 2010			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
					(1)-(2)			(3)-(4)+(5)		(6)+(7)
Code		Description	Total BCBSND Bid	Less NDPERS Retention	Total Premium to BCBSND	Premium Buydown	Medicare Part D Premium	Total Monthly Paid to BCBSND	Plus NDPERS Retention	NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	8	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$2.80	$404.86
2	8	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$2.80	$977.88
COBRA										
4	8	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$10.90	$412.96
5	8	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$22.36	$997.44
Political Subdivision Rates w/o Wellness Program										
Active										
1	7	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$6.84	$408.90
2	7	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$12.58	$987.66
COBRA										
4	7	Single	$405.00	$2.80	$402.20	$0.14		$402.06	$10.90	$412.96
5	7	Family	$978.02	$2.80	$975.22	$0.14		$975.08	$22.36	$997.44
State Contracts with Wellness Program (see Rate Structure 'A')										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program (see Rate Structure 'A')										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree (see Rate Structure 'A')										
21	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	12	1 Medicare only	$165.72	$2.80	$162.92		TBD	TBD	$2.80	TBD
42	12	2 Medicare only	$328.64	$2.80	$325.84		TBD	TBD	$2.80	TBD
50	12	3 Medicare only	$491.56	$2.80	$488.76		TBD	TBD	$2.80	TBD
51	12	4 Medicare only	$654.48	$2.80	$651.68		TBD	TBD	$2.80	TBD
43	12	1 Medicare+Others	$489.10	$2.80	$486.30	$0.14	TBD	TBD	$2.80	TBD
49	12	2 Medicare+Others	$652.02	$2.80	$649.22	$0.14	TBD	TBD	$2.80	TBD
55	12	3 Medicare+Others	$814.94	$2.80	$812.14	$0.14	TBD	TBD	$2.80	TBD

Rate Structure B
First Year (cont'd)
January 1, 2010 - June 30, 2010

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	12	1 Medicare only	$165.72	$2.80	$162.92		TBD	TBD	TBD	TBD
47	12	2 Medicare only	$328.64	$2.80	$325.84		TBD	TBD	TBD	TBD
53	12	3 Medicare only	$491.56	$2.80	$488.76		TBD	TBD	TBD	TBD
54	12	4 Medicare only	$654.48	$2.80	$651.68		TBD	TBD	TBD	TBD
48	12	1 Medicare+Others	$489.10	$2.80	$486.30	$0.14	TBD	TBD	TBD	TBD
52	12	2 Medicare+Others	$652.02	$2.80	$649.22	$0.14	TBD	TBD	TBD	TBD
56	12	3 Medicare+Others	$814.94	$2.80	$812.14	$0.14	TBD	TBD	TBD	TBD

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure B Second Year July 1, 2010 - December 31, 2010			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
					(1)-(2)			(3)-(4)+(5)		(6)+(7)
Code		Description	Total BCBSND Bid	Less NDPERS Retention	Total Premium to BCBSND	Premium Buydown	Medicare Part D Premium	Total Monthly Paid to BCBSND	Plus NDPERS Retention	NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	8	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$2.80	$445.06
2	8	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$2.80	$1,075.36
COBRA										
4	8	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$11.70	$453.96
5	8	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$24.30	$1,096.86
Political Subdivision Rates w/o Wellness Program										
Active										
1	7	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$7.24	$449.50
2	7	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$13.54	$1,086.10
COBRA										
4	7	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$11.70	$453.96
5	7	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$24.30	$1,096.86
State Contracts with Wellness Program (see Rate Structure 'A')										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program (see Rate Structure 'A')										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree (see Rate Structure 'A')										
21	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	12	1 Medicare only	$170.60	$2.80	$167.80		TBD	TBD	$2.80	TBD
42	12	2 Medicare only	$338.40	$2.80	$335.60		TBD	TBD	$2.80	TBD
50	12	3 Medicare only	$506.20	$2.80	$503.40		TBD	TBD	$2.80	TBD
51	12	4 Medicare only	$674.00	$2.80	$671.20		TBD	TBD	$2.80	TBD
43	12	1 Medicare+Others	$503.74	$2.80	$500.94	$0.14	TBD	TBD	$2.80	TBD
49	12	2 Medicare+Others	$671.54	$2.80	$668.74	$0.14	TBD	TBD	$2.80	TBD
55	12	3 Medicare+Others	$839.34	$2.80	$836.54	$0.14	TBD	TBD	$2.80	TBD

Rate Structure B
Second Year (cont'd)
July 1, 2010 - December 31, 2010

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	12	1 Medicare only	$170.60	$2.80	$167.80		TBD	TBD	TBD	TBD
47	12	2 Medicare only	$338.40	$2.80	$335.60		TBD	TBD	TBD	TBD
53	12	3 Medicare only	$506.20	$2.80	$503.40		TBD	TBD	TBD	TBD
54	12	4 Medicare only	$674.00	$2.80	$671.20		TBD	TBD	TBD	TBD
48	12	1 Medicare+Others	$503.74	$2.80	$500.94	$0.14	TBD	TBD	TBD	TBD
52	12	2 Medicare+Others	$671.54	$2.80	$668.74	$0.14	TBD	TBD	TBD	TBD
56	12	3 Medicare+Others	$839.34	$2.80	$836.54	$0.14	TBD	TBD	TBD	TBD

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

Rate Structure B Second Year January 1, 2011 - June 30, 2011			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
					(1)-(2)			(3)-(4)+(5)		(6)+(7)
Code		Description	Total BCBSND Bid	Less NDPERS Retention	Total Premium to BCBSND	Premium Buydown	Medicare Part D Premium	Total Monthly Paid to BCBSND	Plus NDPERS Retention	NDPERS Billing Rate
Political Subdivision Rates with Wellness Program										
Active										
1	8	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$2.80	$445.06
2	8	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$2.80	$1,075.36
COBRA										
4	8	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$11.70	$453.96
5	8	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$24.30	$1,096.86
Political Subdivision Rates w/o Wellness Program										
Active										
1	7	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$7.24	$449.50
2	7	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$13.54	$1,086.10
COBRA										
4	7	Single	$445.20	$2.80	$442.40	$0.14		$442.26	$11.70	$453.96
5	7	Family	$1,075.50	$2.80	$1,072.70	$0.14		$1,072.56	$24.30	$1,096.86
State Contracts with Wellness Program (see Rate Structure 'A')										
Active										
1-3	2	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$2.80	$825.66
COBRA										
4	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	2	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$2.80	$400.06
7	2	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$2.80	$962.84
State Contracts w/o Wellness Program (see Rate Structure 'A')										
Active										
1-3	1	S/F/Dual	$825.80	$2.80	$823.00	$0.14		$822.86	$11.06	$833.92
COBRA										
4	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$10.80	$408.06
5	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$22.06	$982.10
Part-Time/Temporary/LOA										
6	1	Single	$400.20	$2.80	$397.40	$0.14		$397.26	$6.80	$404.06
7	1	Family	$962.98	$2.80	$960.18	$0.14		$960.04	$12.42	$972.46
Non-Medicare Retiree (see Rate Structure 'A')										
21	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$2.80	$600.08
22	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$2.80	$1,200.16
23	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$2.80	$1,500.20
COBRA										
24	12	Single	$600.22	$2.80	$597.42	$0.14		$597.28	$14.80	$612.08
25	12	Family	$1,200.30	$2.80	$1,197.50	$0.14		$1,197.36	$26.80	$1,224.16
26	12	Family (3+)	$1,500.34	$2.80	$1,497.54	$0.14		$1,497.40	$32.80	$1,530.20
Medicare Retiree										
41	12	1 Medicare only	$170.60	$2.80	$167.80		TBD	TBD	$2.80	TBD
42	12	2 Medicare only	$338.40	$2.80	$335.60		TBD	TBD	$2.80	TBD
50	12	3 Medicare only	$506.20	$2.80	$503.40		TBD	TBD	$2.80	TBD
51	12	4 Medicare only	$674.00	$2.80	$671.20		TBD	TBD	$2.80	TBD
43	12	1 Medicare+Others	$503.74	$2.80	$500.94	$0.14	TBD	TBD	$2.80	TBD
49	12	2 Medicare+Others	$671.54	$2.80	$668.74	$0.14	TBD	TBD	$2.80	TBD
55	12	3 Medicare+Others	$839.34	$2.80	$836.54	$0.14	TBD	TBD	$2.80	TBD

Rate Structure B
Second Year (cont'd)
January 1, 2011 - June 30, 2011

Code		Description	(1) Total BCBSND Bid	(2) Less NDPERS Retention	(3) (1)-(2) Total Premium to BCBSND	(4) Premium Buydown	(5) Medicare Part D Premium	(6) (3)-(4)+(5) Total Monthly Paid to BCBSND	(7) Plus NDPERS Retention	(8) (6)+(7) NDPERS Billing Rate
COBRA										
46	12	1 Medicare only	$170.60	$2.80	$167.80		TBD	TBD	TBD	TBD
47	12	2 Medicare only	$338.40	$2.80	$335.60		TBD	TBD	TBD	TBD
53	12	3 Medicare only	$506.20	$2.80	$503.40		TBD	TBD	TBD	TBD
54	12	4 Medicare only	$674.00	$2.80	$671.20		TBD	TBD	TBD	TBD
48	12	1 Medicare+Others	$503.74	$2.80	$500.94	$0.14	TBD	TBD	TBD	TBD
52	12	2 Medicare+Others	$671.54	$2.80	$668.74	$0.14	TBD	TBD	TBD	TBD
56	12	3 Medicare+Others	$839.34	$2.80	$836.54	$0.14	TBD	TBD	TBD	TBD

(1) - BCBSND premium rates, per bid.
(2) - Per contract charge retained by NDPERS
(3) - Total premium paid to BCBSND.
(4) - Amount of premium paid from surplus funds.
(5) - Medicare Part D Premium submitted to BCBSND. (rates for January 1, 2010 and after are to be determined (TBD))
(6) - Amount of premium NDPERS will send to BCBSND.
(7) - Per contract charge retained by NDPERS.
(8) - Premium amount NDPERS will bill its contract holders.

6.2 NDPERS will pay BCBSND, on or before the last day of each month, premium income based on the amount identified in Column 6 of the above Table for type of contract for that month.

6.3 NDPERS will maintain a deposit of $3,000,000 in a Cash Reserve Account held by BCBSND until the settlement of the biennium. This Cash Reserve Account shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

6.4 To fund the amounts identified in Column 4, NDPERS will maintain surplus sufficient to fund transfers of $2,900.00 per month to BCBSND and these Premium Buydown funds will be considered premium income. Final Premium Buydown will be based on actual Non-Medicare contract month exposure times the premiums listed in Column 4 and will be subject to settlement.

6.5 BCBSND will retain any surplus funds from the amounts identified in Column 3 of the above tables. Surplus funds retained by BCBSND shall earn interest at a rate to be determined monthly, based on US Treasury Notes quoted by the Wall Street Journal. The monthly rate will be established at the close of the first trading day each month based on the closing yield to maturity of US Treasury Notes maturing 24 months hence. If there are multiple notes for that maturity, the rate will be based on an average. If there are no notes with that maturity, the next subsequent maturity will be used.

Surplus funds described in the above section 6.5 not used by BCBSND to pay NDPERS Health Plan incurred claims plus retention will be subject to the Final Accounting as described in Section 7 of this Agreement.

6.6 Payments made pursuant to Section 6.2 and pursuant to column 5 of the above Table will be handled as follows:

BCBSND will dispense to Regional Advantage Services LLC, Medicare Part D premiums identified in Column 5 of the above Table for type of contract for that month. Interest will not be paid on this account.

Funds described in section 6.6 are not subject to final accounting as described in section 7 of this Agreement.

7. FINAL ACCOUNTING

7.1 A continual accounting of NDPERS Health Plan experience will take place during the 2009-2011 biennium. Monthly reports of earned income less incurred claims and retention will be produced during the biennium and the twelve months following the biennium.

7.2 Within 31 days of 12 months after the end of the biennium (by July 31, 2012) BCBSND will provide an accounting which will result in an initial settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus Premium Buydown Deposits
3. Plus interest on Surplus Funds
4. Less Claims Incurred during the Biennium and Paid July 1, 2009 through June 30, 2012
5. Less Estimated Claims Incurred and Unpaid at June 30, 2012
6. Less Administrative Expense during the Biennium ($27.64 per contract per month)
7. Less Conversion Cost during the Biennium ($1.38 per contract per month)
8. Less Service Charge during the Biennium ($6.92 per contract per month)
9. If 1+2+3-4-5-6-7-8 of 7.2 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND. The remainder equals Refund paid to NDPERS.
10. If 1+2+3-4-5-6-7-8 of 7.2 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND.

Claims incurred and unpaid will be estimated by the mean of the latest three actual IBNR claims (Incurred But Not Reported) amounts for equivalent periods in the NDPERS history.

7.3 Within 31 days of 24 months after the end of the biennium (by July 31, 2013), BCBSND will provide an accounting, which will result in a final settlement of the biennium agreement as follows:

1. Earned Premium Income during the Biennium
2. Plus Premium Buydown Deposits
3. Plus interest on Surplus Funds
4. Less Claims Incurred during the Biennium and Paid July 1, 2009 through June 30, 2013
5. Less Administrative Expenses during the Biennium ($27.64 per contract per month)
6. Less Conversion Cost during the Biennium ($1.38 per contract per month)
7. Less Service Charge during the Biennium ($6.92 per contract per month)
8. Less any refund paid to NDPERS at initial settlement on July 31, 2012
9. If 1+2+3-4-5-6-7-8 of 7.3 is positive, the lesser of 50% of this amount or $1.5 million is retained by BCBSND for the July 1, 2009 through June 30, 2011 biennium. The remainder equals Refund paid to NDPERS. The maximum retained by BCBSND for the biennium is 50% of $3.0 million of gain.
10. If 1+2+3-4-5-6-7-8 of 7.3 is negative, the lesser of 50% of this amount or $3.0 million will be refunded by NDPERS to BCBSND. BCBSND retains all losses beyond $6.0 million and any estimated gains previously distributed to NDPERS are subject to refund back to BCBSND based on this final settlement. The maximum loss NDPERS is subject to is 50% of $6.0 million of loss.

8. TERM AND TERMINATION OF AGREEMENT

8.1 The term of this Agreement shall be for a two year period from July 1, 2009 through June 30, 2011.

8.2 This Agreement may be terminated by mutual agreement of both parties, upon 60 days notice, in writing.

Either party may terminate this Agreement effective 90 days following delivery of written notice to the other party, or at such later date as may be stated in the notice, under any of the following conditions:

a. If funding from federal, state or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The Agreement may be modified by agreement of the parties in writing to accommodate a reduction of funds.

b. If federal or state laws, rules or regulations are modified, changed or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this Agreement or are no longer eligible for the funding proposed for payments authorized by this Agreement.

c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this Agreement, is for any reason denied, revoked, suspended or not renewed.

Any such termination of this Agreement shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

d. In the event of a breach by either party, other than for nonpayment of premium, the other party may terminate this Agreement by written notice to the breaching party. The breaching party has 31 days to fully cure the breach. If the breach is not cured within 31 days after written notice, this Agreement will immediately terminate.

9. BLUECARD PROGRAM®

Like all Blue Cross and Blue Shield Licensees, BCBSND participates in a program called "BlueCard." Whenever Members access health care services outside the geographic area BCBSND serves, the claim for those services may be processed through BlueCard and presented to BCBSND for payment in conformity with network access rules of the BlueCard Policies then in effect ("Policies"). Under BlueCard, when Members receive Covered Services within the geographic area served by an on-site Blue Cross and/or Blue Shield Licensee ("Host Blue"), BCBSND will remain responsible to the Group for fulfilling BCBSND's contract obligations. However, the Host Blue will only be responsible, in accordance with applicable BlueCard Policies, if any, for providing such services as contracting with its participating providers and handling all interaction with its participating providers. The financial terms of BlueCard are described generally below.

Liability Calculation Method Per Claim - The calculation of Member liability on claims for Covered Services incurred outside the geographic area BCBSND serves and processed through BlueCard will be based on the lower of the provider's billed charges or the negotiated price BCBSND pays the Host Blue.

The methods employed by a Host Blue to determine a negotiated price will vary among Host Blues based on the terms of each Host Blue's provider contracts. The negotiated price paid to a Host Blue by BCBSND on a claim for health care services processed through BlueCard may represent:

1. the actual price paid on the claim by the Host Blue to the health care provider ("Actual Price"), or

2. an estimated price, determined by the Host Blue in accordance with BlueCard Policies, based on the Actual Price increased or reduced to reflect aggregate payments expected to result from settlements, withholds, any other contingent payment arrangements and non-claims transactions with all of the Host Blue's health care providers or one or more particular providers ("Estimated Price"), or

3. an average price, determined by the Host Blue in accordance with BlueCard Policies, based on a billed charges discount representing the Host Blue's average savings expected after settlements, withholds, any other contingent payment arrangements and non-claims transactions for all of its providers or for a specified group of providers ("Average Price"). An Average Price may result in greater variation to the Member and the Group from the Actual Price than would an Estimated Price.

Host Blues using either the Estimated Price or Average Price will, in accordance with BlueCard Policies, prospectively increase or reduce the Estimated Price or Average Price to correct for over- or underestimation of past prices. However, the amount paid by the Member is a final price and will not be affected by such prospective adjustment.

Statutes in a small number of states may require a Host Blue either (1) to use a basis for calculating Member liability for Covered Services that does not reflect the entire savings realized, or expected to be realized, on a particular claim or (2) to add a surcharge. Should any state statutes mandate liability calculation methods that differ from the negotiated price methodology or require a surcharge, the Host Blue would then calculate Member liability for any Covered Services in accordance with the applicable state statute in effect at the time the Member received those services.

Return of Overpayments - Under BlueCard, recoveries from a Host Blue or from participating providers of a Host Blue can arise in several ways, including, but not limited to, anti-fraud and abuse audits, provider/hospital audits, credit balance audits, utilization review refunds, and unsolicited refunds. In some cases, the Host Blue will engage third parties to assist in discovery or collection of recovery amounts. The fees of such a third party are netted against the recovery. Recovery amounts, net of fees, if any, will be applied in accordance with applicable BlueCard Policies, which generally require correction on a claim-by-claim or prospective basis.

10. RETROSPECTIVE DISCOUNT PAYMENT

Regarding prescription medications or drugs purchased by Members under the terms of the Plan, the Plan Administrator agrees to pay to BCBSND the amount due to the pharmacy (or other prescription drug retailer) under the terms of the pharmacy provider participating agreement. The amount due to the pharmacy under the terms of the pharmacy provider participating agreement is that which is due at the time the prescription medication or drug is purchased by the Member. The amount due to the pharmacy under the pharmacy provider participating agreement is calculated without regard to any subsequent, retrospective manufacturer discount that may apply to the cost of the prescription medication or drug. The Plan Administrator acknowledges and agrees that, in some cases but not all, drug manufacturers may offer retrospective discounts to BCBSND on prescription medications and drugs purchased under the terms of the Plan. If a drug manufacturer makes a retrospective discount payment available, the Plan Administrator acknowledges and agrees that a portion of any such rebate may be retained by an entity that performs manufacturer discount program services on behalf of BCBSND under the terms of this Agreement. The Plan Administrator further acknowledges and agrees that, when made available by the drug manufacturer, another portion of the retrospective discount payment is retained by BCBSND. In its sole discretion, BCBSND may periodically refund to the Plan all or part of any rebate payments received. The calculation of any refund rests in the sole discretion of BCBSND.

In its sole discretion, and only in the case where a Member is required to pay Coinsurance as part of the Cost Sharing Amounts for each Prescription Medication and Drug provided under the terms of this Benefit Plan, BCBSND may periodically refund to Members a proportional amount of any retrospective discount payments received. The calculation and payment of any such proportional refund rests in the sole discretion of BCBSND. The manner in which such retrospective discount program payment refund, if any, is distributed to a Member rests in the sole discretion of BCBSND. The Member waives any right, title, or interest in and to such proportional retrospective discount payment once the Member is no longer eligible for benefits under the terms of this Benefit Plan, and BCBSND may use its discretion and disburse any such retrospective discount payments as it deems appropriate and necessary in its administration of this Benefit Plan. The Member shall pay all Cost Sharing Amounts at the time the Prescription Medication or Drug is purchased, without regard to any potential retrospective discount.

11. GENERAL PROVISIONS:

11.1 This Agreement is between NDPERS and BCBSND and does not create any rights or legal relationships between BCBSND and any Member(s).

11.2 This Agreement, together with the Response to the Request for Proposal and any exhibits, attachments and amendments constitutes the entire Agreement between the parties. No promises, terms, conditions or obligations other than those contained in this Agreement are valid or binding. Any prior agreements, statements, promises, negotiations, inducements or representations, either oral or written, made by either party or agent of either party that are not contained in this Agreement are of no effect. No modification of the terms or provisions of this Agreement shall be effective unless evidenced by a written amendment, signed by an authorized officer or employee of NDPERS and BCBSND.

11.3 This Agreement shall be governed by and construed according to the laws of the state of North Dakota.

11.4 Failure of either party at any time to require performance by the other party of any provision of this Agreement shall not be deemed to be a continuing waiver of that provision or a waiver of any other provision of this Agreement.

11.5 No assignment of this Agreement in whole or in part may be made by either party without written agreement approved by both parties.

11.6 All notices and correspondence required or permitted to be given under this Agreement shall be given by personal delivery to the other party or may be sent by mail, postage prepaid to the other party at the following addresses:

NORTH DAKOTA PUBLIC EMPLOYEES
RETIREMENT SYSTEM
PO Box 1657
Bismarck, North Dakota 58502

BLUE CROSS BLUE SHIELD
OF NORTH DAKOTA
4510 13th Avenue South
Fargo, North Dakota 58121

11.7 Neither party shall be liable for any delay in or failure to perform under this Agreement due to an act of God or due to war mobilization, insurrection, rebellion, civil commotion, riot, act of an extremist or public enemy, sabotage, labor dispute, explosion, fire, flood, storm, accident, drought, equipment failure, power failure, fuel or energy shortages, unavoidable delay of carriers, embargo, law, ordinance, act, rule or regulation of any government, whether valid or invalid.

11.8 NDPERS hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans (the "Association"), permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. NDPERS further acknowledges and agrees this Agreement was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to NDPERS for any of BCBSND's obligations to NDPERS created under this Agreement. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Agreement.

11.9 If NDPERS or BCBSND creates benefit communications for Members, relating to the Certificate of Insurance attached as Exhibit A, such communications will be sent to BCBSND or NDPERS for comment prior to distribution. Either party will have 5 business days to comment on the communication. If one party fails to advise the other within that 5-day period, it will be presumed there are no comments on the communication. If NDPERS has a digital or online version of the Certificate of Insurance available to its Members, NDPERS agrees that it will not alter, modify or change the language of the Certificate of Insurance, and further agrees the Certificate of Insurance, attached as Exhibit A, will be the controlling document in the event of any conflict or liability that might arise as the result of any alterations, modifications or changes made by NDPERS. In the event a claim is paid based on NDPERS's modified or altered digital or online Certificate of Insurance, NDPERS is liable for all such claims. NDPERS further agrees that no waiver of this agreement is valid unless in writing and approved by BCBSND.

11.10 When coverage under this Agreement is terminated, BCBSND will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within a reasonable period of time. Certificates of Creditable Coverage may also be obtained from BCBSND upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through BCBSND.

11.11 Upon the effective date of any final regulation or amendment to final regulations with respect to PHI, Standard Transactions, the security of health information or other aspects of the Health Insurance Portability and Accountability Act of 1996 applicable to this Agreement, this Agreement will automatically amend such that the obligations imposed on the Plan Sponsor, the Plan Administrator and BCBSND remain in compliance with such regulations, unless BCBSND elects to terminate this Agreement by providing the Plan Sponsor and the Plan Administrator notice of termination in accordance with this Agreement at least thirty-one (31) days before the effective date of such final regulation or amendment to final regulations.

12. **DISPUTES AND INDEMNIFICATION**

If litigation is filed regarding denial of benefits or otherwise, and BCBSND is named as the sole defendant, BCBSND will have the right to manage and have full control of litigation and to determine whether to pay, compromise, litigate or appeal the litigation.

NDPERS agrees that all Retrospective Discount Payments will be made to Members of the Plan. BCBSND agrees to indemnify NDPERS for any judgments against NDPERS solely arising out of NDPERS' decision to participate in the Retrospective Discount Payment program.

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM (PLAN SPONSOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA*
4510 13th Avenue South
Fargo, North Dakota 58121

Its Interim President and CEO

Date: June 9, 2009

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM GROUP HEALTH PLAN (PLAN ADMINISTRATOR)
PO Box 1657
Bismarck, North Dakota 58502

By: _____

Title: _____

Date: _____

Effective Date: 07/01/2009-06/30/2011

*An Independent Licensee of the Blue Cross and Blue Shield Association.

Certificate of Insurance
& Summary Plan Description

NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM
DAKOTA PLAN

July 1, 2009

Health Care Coverage

BlueCross BlueShield
of North Dakota
An independent licensee of the Blue Cross & Blue Shield Association

BLUE CROSS BLUE SHIELD OF NORTH DAKOTA
NDPERS SERVICE CENTER

Questions?	Our Member Services staff is available to answer questions about your coverage –
Call Member Services:	Monday through Friday 8:00 a.m. - 5:00 p.m. CST (701) 282-1400 or 1-800-223-1704
North Dakota Relay Service:	1-800-366-6888
Office Address and Hours:	You may visit our Home Office during normal business hours – Monday through Friday 8:00 a.m. - 4:30 p.m. CST Blue Cross Blue Shield of North Dakota 4510 13th Avenue South Fargo, North Dakota 58121
Mailing Address:	You may write to us at the following address – Blue Cross Blue Shield of North Dakota 4510 13th Avenue South Fargo, North Dakota 58121
BCBSND Internet Address: **NDPERS Address:**	www.BCBSND.com www.nd.gov/ndpers
Provider Directories:	Members can obtain a Provider Directory by calling the telephone number listed above or by visiting the BCBSND or NDPERS website.

Your employer has established an employee welfare benefit plan for Eligible Employees and their Eligible Dependents. The following Certificate of Insurance and Summary Plan Description is provided to you in accordance with the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information. This Certificate of Insurance and Summary Plan Description and the NDPERS Service Agreement are the official benefit plan documents for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance and Summary Plan Description and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

BCBSND shall construe and interpret the provisions of the Service Agreement, the Certificate of Insurance and Summary Plan Description and related documents, including doubtful or disputed terms and to determine all questions of eligibility; and to conduct any and all reviews of claims denied in whole or in part.

PLAN NAME

North Dakota Public Employees Retirement System Dakota Plan

NAME AND ADDRESS OF EMPLOYER (PLAN SPONSOR)

NDPERS
400 East Broadway, Suite 505
PO Box 1657
Bismarck, North Dakota 58502

PLAN SPONSOR'S IRS EMPLOYER IDENTIFICATION NUMBER

45-0282090

PLAN NUMBER ASSIGNED BY THE PLAN SPONSOR

N/A

TYPE OF WELFARE PLAN

Health

TYPE OF ADMINISTRATION

This employee welfare benefit plan is fully insured by BCBSND and issued by BCBSND.

NAME AND ADDRESS OF BCBSND

Blue Cross Blue Shield of North Dakota (BCBSND)
4510 13th Avenue South
Fargo, North Dakota 58121

PLAN ADMINISTRATOR'S NAME, BUSINESS ADDRESS AND BUSINESS TELEPHONE NUMBER

NDPERS
400 East Broadway, Suite 505
PO Box 1657
Bismarck, North Dakota 58502
701-328-3900

NAME AND ADDRESS OF AGENT FOR SERVICE OF LEGAL PROCESS

Plan Administrator:

Sparb Collins
NDPERS
400 East Broadway, Suite 505
PO Box 1657
Bismarck, North Dakota 58502

BCBSND:

Daniel E. Schwandt
Blue Cross Blue Shield of North Dakota
4510 13th Avenue South
Fargo, North Dakota 58121

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

TITLE OF EMPLOYEES AUTHORIZED TO RECEIVE PROTECTED HEALTH INFORMATION

Benefit Programs Division
Research & Benefit Program Development Division
Accounting & IT Division
Administrative Services Division
Internal Audit Division
Executive Director

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business. These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

STATEMENT OF ELIGIBILITY TO RECEIVE BENEFITS

State employees or employees of participating Political Subdivisions who are eighteen (18) years of age whose services are not limited in duration, who are filling an approved and regularly funded position, and who are employed at least 17 and one-half hours per week and at least five months each year or those first employed after August 1, 2003, is employed at least twenty (20) hours per week and at least twenty weeks each year of employment are eligible to receive benefits. Temporary employees who work a minimum of 20 hours per week and at least 20 weeks each year are eligible to receive benefits. An eligible employee is entitled to coverage the first of the month following the month of employment, provided the employee submits an application for coverage within the first 31 days of employment. As an eligible employee, you will be provided with an application when you become eligible for coverage. Each eligible employee may elect to enroll his/her Eligible Dependents. Eligible employees also include non-Medicare eligible retired and terminated employees and their Eligible Dependents who remain eligible to participate in the uniform group insurance program pursuant to applicable state law as provided in NDCC section 54-52.1-03(3) and federal COBRA continuation regulations. For a comprehensive description of eligibility refer to the NDPERS web site.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. BCBSND has the ultimate decision making authority regarding eligibility to receive benefits.

DESCRIPTION OF BENEFITS

See the Schedule of Benefits and the Covered Services Sections. Refer to the Table of Contents for page numbers.

SOURCES OF PREMIUM CONTRIBUTIONS TO THE PLAN AND THE METHOD BY WHICH THE AMOUNT OF CONTRIBUTION IS CALCULATED

The contributions for single or family for state employees is paid at 100% by the state. The contributions for employees of participating political subdivisions is at the discretion of the subdivision and subject to the minimum contribution requirements of BCBSND. The contributions for temporary employees is either at their own expense or their employer may pay the premium subject to its budget authority.

END OF THE YEAR DATE FOR PURPOSES OF MAINTAINING THE PLAN'S FISCAL RECORDS

June 30

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INTRODUCTION

This Certificate of Insurance describes the health care benefits you have under the NDPERS Benefit Plan. The various Covered Services you receive are called your “benefits”. All the benefits described are subject to all the terms, conditions, limitations and definitions included in the NDPERS Benefit Plan, as well as all provisions required by state law.

Participants in this employee health benefit plan are not vested. The benefit plan may be modified, amended or terminated by NDPERS and BCBSND at any time.

Anyone with any disability who might need some form of accommodation or assistance concerning the services or information provided please contact the NDPERS ADA Coordinator at 701-328-3900.

In compliance with the Americans with Disabilities Act this document can be provided in alternate formats. If you require accommodation or assistance concerning the services or information provided please contact the NDPERS ADA Coordinator at 701-328-3900.

If you have questions, please consult your employer for more specific information on your benefits. You may also call the Blue Cross Blue Shield of North Dakota’s NDPERS Service Center at 1-800-223-1704 and 282-1400 for Fargo area Members. The North Dakota Relay Service toll-free number is 1-800-366-6888.

Benefits described in this Benefit Plan are available to Members and cannot be transferred or assigned. Any attempt to transfer or assign the benefits of this Benefit Plan to ineligible persons will result in automatic termination of this Benefit Plan by BCBSND.

Please review this Benefit Plan and retain it with your other important papers. If you are not satisfied with this Benefit Plan for any reason, you may return it to BCBSND within 10 days of its delivery to you and the premium paid will be refunded.

The Subscriber will receive an Identification Card displaying the Benefit Plan Number and other information about this Benefit Plan. All Members share this Benefit Plan Number. Carry the Identification Card at all times. If the Identification Card is lost, contact BCBSND to request a replacement. The Subscriber must not let anyone other than an Eligible Dependent, see definition 8.21, use the Identification Card. If another person is allowed to utilize the Identification Card, the Member’s coverage will be terminated.

Present your Identification Card to your Health Care Provider to identify yourself as a Member of BCBSND. Participating Health Care Providers will submit claims on your behalf. You will be notified in writing by BCBSND of benefit payments made for Covered Services. Please review your Explanation of Benefits and advise BCBSND if you were billed for services you did not receive.

If you receive services from a Health Care Provider that will not submit claims on your behalf, you are responsible for the submission of a written notice of a claim for benefits of the services you received within 18 months after services were provided. The written notice must include information necessary for BCBSND to determine benefits.

The Subscriber hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans, (the “Association”) permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. The Subscriber further acknowledges and agrees this Benefit Plan was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to the Subscriber for any of BCBSND’s obligations to the Subscriber created under this Benefit Plan. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Benefit Plan.

SECTION 1
SCHEDULE OF BENEFITS

This section outlines the payment provisions for Covered Services described in Section 2, subject to the definitions, exclusions, conditions and limitations of this Benefit Plan.

1.1 COST SHARING AMOUNTS

Cost Sharing Amounts include Coinsurance, Copayment, Deductible, Prescription Medication or Drug Coinsurance Maximum, Infertility Services Deductible and Out-of-Pocket Maximum Amounts. A Member is responsible for the Cost Sharing Amounts. Please see Section 1.5, Outline of Covered Services, and the Benefit Plan Attachment for the specific Cost Sharing Amounts that apply to this Benefit Plan. All Members contribute to the Deductible and Coinsurance Amounts. However, a Member's contribution cannot be more than the Single Coverage amount. Health Care Providers may bill you directly or request payment of Coinsurance, Copayment and Deductible Amounts at the time services are provided.

	Basic Plan	PPO Plan
Under this Benefit Plan the Deductible Amounts are:		
Single Coverage	$400 per Benefit Period	$400 per Benefit Period
Family Coverage	$1,200 per Benefit Period	$1,200 per Benefit Period
Under this Benefit Plan the Coinsurance Maximum Amounts are:		
Single Coverage	$1,250 per Benefit Period	$750 per Benefit Period
Family Coverage	$2,500 per Benefit Period	$1,500 per Benefit Period
Under this Benefit Plan the Out-of-Pocket Maximum Amounts are:		
Single Coverage	$1,650 per Benefit Period	$1,150 per Benefit Period
Family Coverage	$3,700 per Benefit Period	$2,700 per Benefit Period

Under this Benefit Plan the Outpatient Prescription Medication or Drug Coinsurance Maximum Amount is:

$1,000 per Member per Benefit Period

Under this Benefit Plan the Lifetime Infertility Services Deductible Amount is:

$500 per Member

1.2 LIFETIME MAXIMUM

The Lifetime Maximum is $2,000,000 per Member. This Lifetime Maximum includes all specific Lifetime Maximums listed in the Outline of Covered Services.

1.3 SELECTING A HEALTH CARE PROVIDER

The benefit payment available under this Benefit Plan differs depending on the Subscriber's choice of a Health Care Provider. This Benefit Plan recognizes the following categories of Health Care Providers based on the Health Care Provider's relationship with BCBSND:

Members should refer to the BCBSND website for a list of Health Care Providers or call Member Services at the telephone number on the back of the Identification Card for a provider directory. The website is continuously updated and is the most up-to-date listing of Health Care Providers.

PPO Plan

PPO stands for "Preferred Provider Organization" and is a group of Health Care Providers who provide discounted services to the Members of NDPERS. Because PPO Health Care Providers charge BCBSND less for medical care services provided to the Members of NDPERS, cost savings are passed on to Members by way of reduced Cost Sharing Amounts.

To receive a higher payment level Covered Services must be received from an NDPERS PPO Health Care Provider. Please see the NDPERS PPO Health Care Provider Listing.

Basic Plan

If a PPO Health Care Provider is not available in the Member's area, or if the Member chooses or is referred to a Health Care Provider not participating in the Preferred Provider Organization, the Member will receive the Basic Plan benefits.

Other Health Care Providers

Participating Health Care Providers

When Covered Services are received from a Participating Health Care Provider, the Participating Health Care Provider agrees to submit claims to BCBSND on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider according to the terms of this Benefit Plan and the participation agreement between the Health Care Provider and BCBSND.

When Covered Services are received from a Participating Health Care Provider, a provider discount provision is in effect. This means the Allowance paid by BCBSND will be considered by the Participating Health Care Provider as payment in full, except for Cost Sharing Amounts, Maximum Benefit Allowances or Lifetime Maximums.

Participating Health Care Providers have also agreed to perform managed benefits requirements on behalf of the Member.

Nonparticipating Health Care Providers

If a Member receives Covered Services from a Nonparticipating Health Care Provider, the Member will be responsible for notifying BCBSND of the receipt of services. If BCBSND needs copies of medical records to process the Member's claim, the Member is responsible for obtaining such records from the Nonparticipating Health Care Provider. In addition, the Member will be responsible for compliance with all required managed benefits provisions. See Section 3, Managed Benefits.

1. Nonparticipating Health Care Providers Within the State of North Dakota

   If a Member receives Covered Services from a Nonparticipating Health Care Provider within the state of North Dakota, benefit payments will be based on the Allowance and reduced by an additional 20%. The 20% payment reduction does not apply toward the Out-of-Pocket Maximum Amount. The Allowance will not exceed 80% of the billed charge.

   The Member is responsible for the 20% payment reduction and any charges in excess of the Allowance for Covered Services.

   Benefit payments will be made directly to the Subscriber for Covered Services received from a Nonparticipating Health Care Provider. BCBSND will not honor an assignment of benefit payments to any other person or Health Care Provider.

2. Nonparticipating Health Care Providers Outside the State of North Dakota

   If a Member receives Covered Services from a Nonparticipating Health Care Provider outside the state of North Dakota, the Allowance for Covered Services will be an amount within a general range of payments made and judged to be reasonable by BCBSND.

   The Member is responsible for any charges in excess of the Allowance for Covered Services.

   If a Member receives Covered Services from a Health Care Provider in a county contiguous to North Dakota, the benefit payment will be provided on the same basis as a Health Care Provider located in the state of North Dakota. If the Health Care Provider is a Participating Health Care Provider, the benefit payment will be as indicated in the Outline of Covered Services. If the Health Care Provider is not a Participating Health Care Provider, benefits will be available at the same level as Nonparticipating Health Care Providers within the state of North Dakota.

   Payment for Covered Services received from out-of-state Health Care Providers will be made directly to the Subscriber unless a special arrangement exists between BCBSND and the Health Care Provider. BCBSND may designate an out-of-state Health Care Provider as Nonpayable.

   An assignment of payment to an out-of-state Health Care Provider must be in writing, filed with each claim and approved by BCBSND.

Nonpayable Health Care Providers

If BCBSND designates a Health Care Provider as Nonpayable, no benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of the Nonpayable Health Care Provider. Notice of designation as a Nonpayable Health Care Provider will be provided to Members at least 30 days prior to the effective date of designation as a Nonpayable Health Care Provider. As of the date of termination, all charges incurred by a Member for services received from the Nonpayable Health Care Provider will be the Subscriber's responsibility.

Participating Providers with the BlueCard® Program

When a Member obtains health care services through BlueCard outside the geographic area BCBSND serves, the amount the Member pays for Covered Services is calculated on the **lower** of:

- The billed charges for Covered Services, or
- The negotiated price that the on-site Blue Cross and/or Blue Shield Plan (“Host Blue”) passes on to BCBSND.

Often, this "negotiated price" will consist of a simple discount, which reflects the actual price paid by the Host Blue. But sometimes it is an estimated price that factors into the actual price expected settlements, withholds, any other contingent payment arrangements and non-claims transactions with a Health Care Provider or with a specified group of Health Care Providers. The negotiated price may also be billed charges reduced to reflect an **average** expected savings with the Health Care Provider or with a specified group of Health Care Providers. The price that reflects average savings may result in greater variation (more or less) from the actual price paid than will the estimated price. The negotiated price will also be adjusted in the future to correct for over- or underestimation of past prices. However, the amount the Member pays is considered a final price.

Statutes in a small number of states may require the Host Blue to use a basis for calculating Member liability for Covered Services that does not reflect the entire savings realized or expected to be realized on a particular claim or to add a surcharge. Should any state statutes mandate Member liability calculation methods that differ from the usual BlueCard method noted above in paragraph one of this section or require a surcharge, BCBSND would then calculate the Member's liability for any Covered Service in accordance with the applicable state statute in effect at the time the Member received care.

Health Care Providers Outside the United States

The benefits available under this Benefit Plan are also available to Members traveling or living outside of the United States. The Preauthorization and Prior Approval requirements will apply. If the Health Care Provider is a Participating Provider with the BlueCard Program, the Participating Health Care Provider will submit claims for reimbursement on behalf of the Member. Reimbursement for Covered Services will be made directly to the Participating Health Care Provider. If the Health Care Provider does not participate with the BlueCard Program the Member will be responsible for payment of services and submitting a claim for reimbursement to BCBSND. BCBSND will provide translation and currency conversion services for the Member's claims outside of the United States.

BCBSND will reimburse Prescription Medications or Drugs purchased outside the United States by Members who live outside the United States where no suitable alternative exists. Reimbursement will also be made in instances where Members are traveling and new drug therapy is initiated for acute conditions or where emergency replacement of drugs originally prescribed and purchased in the United States is necessary. The reimbursable supply of drugs in travel situations will be limited to an amount necessary to assure continuation of therapy during the travel period and for a reasonable period thereafter.

Medicare Private Contracts

A Health Care Provider may ask a Member who is eligible for Medicare to enter into a Medicare private contract where the Member and the Health Care Provider agree that the Member is to be provided with services outside of the Medicare program. This Medicare private contract must be entered into between the Member and the Health Care Provider prior to the receipt of any services and indicate that neither the Member nor the Health Care Provider is permitted to file a request for reimbursement with Medicare for any of the services provided by the Health Care Provider and that the Health Care Provider can charge any amount agreed to by the Member for services instead of the Medicare limiting charge. Under a Medicare private contract, the Health Care Provider can set any price for services but Medicare will not pay anything. If the Member enters into a Medicare private contract, Medicare will not pay any portion of the services and BCBSND will limit its payment to the amount BCBSND would have paid as though Medicare was paying for such Covered Services. If a Member enters into a Medicare private contract, the Member is responsible for paying the difference between the amount billed by the Health Care Provider for Covered Services and the amount paid by BCBSND.

1.4 WAITING PERIODS FOR PREEXISTING CONDITIONS FOR LATE ENROLLEES

Members accepted as Late Enrollees will not be eligible for benefits for any services, supplies or charges for the care or treatment the Member receives for a Preexisting Condition during a period of 12 months following the individual Member's effective date of this Benefit Plan. However, this waiting period may be reduced by aggregate days of membership under Qualifying Previous Coverage, if continuous until at least 63 days prior to the individual Member's Enrollment Date under this Benefit Plan.

1.5 OUTLINE OF COVERAGE

This outline of covered services describes the Covered Services and the level of payment for the Covered Services. **For a description of the Covered Services, see page 15.**

PPO Plan: Benefits for Covered Services received by Eligible Dependents, see definition 8.21, who are residing out-of-area will be paid at the Basic level if the Subscriber or the Subscriber's spouse is required by court order to provide health coverage for that Eligible Dependent. You may be asked to provide a copy of the court order to BCBSND.

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
Inpatient Hospital and Medical Services		
• Inpatient Hospital Services	75% of Allowed Charge.	80% of Allowed Charge.
• Inpatient Medical Care Visits	75% of Allowed Charge.	80% of Allowed Charge.
• Ancillary Services	75% of Allowed Charge.	80% of Allowed Charge.
• Inpatient Consultations	75% of Allowed Charge.	80% of Allowed Charge.
• Concurrent Services	75% of Allowed Charge.	80% of Allowed Charge.
• Initial Newborn Care	75% of Allowed Charge. Deductible Amount is waived.	80% of Allowed Charge. Deductible Amount is waived.
Inpatient and Outpatient Surgical Services		
• Professional Health Care Provider Services	75% of Allowed Charge.	80% of Allowed Charge.
• Assistant Surgeon Services when Medically Appropriate and Necessary	75% of Allowed Charge.	80% of Allowed Charge.
• Ambulatory Surgical Facility Services	75% of Allowed Charge.	80% of Allowed Charge.
• Hospital Ancillary Services	75% of Allowed Charge.	80% of Allowed Charge.
• Anesthesia Services	75% of Allowed Charge.	80% of Allowed Charge.
Transplant Services	Benefits are subject to a Lifetime Maximum of 2 transplant procedures for the same condition.	
• Inpatient and Outpatient Hospital and Medical Services	75% of Allowed Charge when Prior Approval is received from BCBSND.	80% of Allowed Charge when Prior Approval is received from BCBSND.
• Transportation Services	75% of Allowed Charge. Benefits are subject to a Maximum Benefit Allowance of $1,000 per transplant procedure.	80% of Allowed Charge.
Temporomandibular (TMJ) or Craniomandibular (CMJ) Joint Treatment		
• Surgical Services	75% of Allowed Charge. Benefits are subject to a Lifetime Maximum of $10,000 per Member.	80% of Allowed Charge.
• Nonsurgical Services	75% of Allowed Charge. Benefits are subject to a Lifetime Maximum of $2,500 per Member.	80% of Allowed Charge.

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
Outpatient Hospital and Medical Services		
• Home and Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
• Diagnostic Services	75% of Allowed Charge.	80% of Allowed Charge.
• Emergency Services	$50 Copayment Amount, then 75% of Allowed Charge for emergency room facility fee billed by a Hospital.	$50 Copayment Amount, then 80% of Allowed Charge for emergency room facility fee billed by a Hospital.
	The Copayment Amount for the emergency room facility fee is waived when a Member is admitted directly as an Inpatient to a Hospital.	
	75% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. Deductible Amount is waived.	80% of Allowed Charge for office or emergency room visit billed by a Professional Health Care Provider. Deductible Amount is waived.
	75% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.	80% of Allowed Charge for all Ancillary Services received in an emergency room or Professional Health Care Provider's office.
• Dental Services Related to Accidental Injury	75% of Allowed Charge.	80% of Allowed Charge.
• Radiation Therapy and Chemotherapy	75% of Allowed Charge.	80% of Allowed Charge.
• Dialysis Treatment	75% of Allowed Charge.	80% of Allowed Charge.
• Home Infusion Therapy Services	75% of Allowed Charge.	80% of Allowed Charge.
• Visual Training for Members under age 10	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a Lifetime Maximum of 16 visits per Member.	
• Allergy Services	75% of Allowed Charge.	80% of Allowed Charge.
• Foods and food products for the dietary treatment of Members born after 12/31/62 with maple syrup urine disease or phenylketonuria (PKU)	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a Maximum Benefit Allowance of $3,000 per Member per Benefit Period.	
• Dental Anesthesia and Hospitalization	75% of Allowed Charge. Prior Approval is required for all Members age 9 and older.	80% of Allowed Charge. Prior Approval is required for all Members age 9 and older.

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
• Outpatient Nutrition Care Services	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
	Benefits are available to the Maximum Benefit Allowance for the following diagnosed medical conditions: • Hyperlipidemia – Maximum Benefit Allowance of 2 Office Visits per Member per Benefit Period. • Gestational Diabetes – Maximum Benefit Allowance of 2 Office Visits per Member per Benefit Period. • Chronic Renal Failure – Maximum Benefit Allowance of 4 Office Visits per Member per Benefit Period. • Diabetes Mellitus – Maximum Benefit Allowance of 4 Office Visits per Member per Benefit Period. • Anorexia Nervosa – Maximum Benefit Allowance of 4 Office Visits per Member per Benefit Period. • Bulimia – Maximum Benefit Allowance of 4 Office Visits per Member per Benefit Period. • PKU – Maximum Benefit Allowance of 4 Office Visits per Member per Benefit Period. • Obesity – Maximum Benefit Allowance of 1 Office Visit per Member per Benefit Period.	
Wellness Services		
• Well Child Care to the Member's 6th birthday	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
	Benefits are available as follows: • 7 visits for Members from birth through 12 months; • 3 visits for Members from 13 months through 24 months; • 1 visit per Benefit Period for Members 25 months through 72 months.	
• Well Child Care Immunizations to the Member's 6th birthday	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
	Covered immunizations are those that have been published as policy by the Centers for Disease Control, Including DPT (Diphtheria-Pertussis-Tetanus), MMR (Measles-Mumps-Rubella), Hemophilus Influenza B, Hepatitis, Polio, Varicella (Chicken Pox), Pneumococcal Disease and Influenza Virus.	

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
• Preventive Screening Services for Members age 6 and older	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge subject to a Maximum Benefit Allowance of $200 per Member per Benefit Period. Deductible Amount is waived.	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge subject to a Maximum Benefit Allowance of $200 per Member per Benefit Period. Deductible Amount is waived.
	Benefits include: • One routine physical examination per Member per Benefit Period. • Routine diagnostic screenings. • Routine screening procedures for cancer. A Health Care Provider will counsel Members as to how often preventive services are needed based on the age, gender and medical status of the Member. Benefits beyond the Maximum Benefit Allowance will be subject to Cost Sharing Amounts. See Outpatient Hospital and Medical Services.	
• Mammography Screening Services	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
	Benefits are available as follows: • One service for Members between the ages of 35 and 40; • One service per year for Members age 40 and older. Additional benefits will be available for mammography services when Medically Appropriate and Necessary and ordered by a Professional Health Care Provider. See Outpatient Hospital and Medical Services.	
• Routine Pap Smear	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
	Benefits are subject to a Maximum Benefit Allowance of 1 pap smear per Benefit Period.	
Related Office Visit	$30 Copayment Amount for the Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount for the Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
	Additional benefits will be available for pap smears when Medically Appropriate and Necessary and ordered by a Professional Health Care Provider. See Outpatient Hospital and Medical Services.	

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
• Prostate Cancer Screening	75% of Allowed Charge. Deductible Amount is waived.	80% of Allowed Charge. Deductible Amount is waived.
	Benefits are available for an annual digital rectal examination and an annual prostate-specific antigen test for an asymptomatic male age 50 and older, a black male age 40 and older, and a male age 40 and older with a family history of prostate cancer.	
Related Office Visit	$30 Copayment Amount for the Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount for the Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
	Additional benefits will be available for prostate cancer screening when Medically Appropriate and Necessary and ordered by a Professional Health Care Provider. See Outpatient Hospital and Medical Services.	
• Fecal Occult Blood Testing for Colorectal Cancer Screening	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
	Benefits are available for Members age 50 and older, subject to a Maximum Benefit Allowance of 1 test per Benefit Period.	
• Immunizations other than Well Child Care	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
	Covered immunizations are those that have been published as policy by the Centers for Disease Control, Including Tetanus, Influenza Virus, Pneumococcal Pneumonia, MMR (Measles-Mumps-Rubella), Varicella (Chicken Pox), Meningococcal Disease and Human Papillomavirus (HPV). Certain age restrictions may apply.	
• Diabetes Education Services	75% of Allowed Charge Deductible Amount is waived.	80% of Allowed Charge Deductible Amount is waived.
	Benefits are subject to a Lifetime Maximum of $1,000 per Member for programs approved by BCBSND.	
• Dilated Eye Examination (for diabetes related diagnosis)	$30 Copayment Amount, then 75% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount, then 80% of Allowed Charge. Deductible Amount is waived.
	Benefits are subject to a Maximum Benefit Allowance of one examination per Member per Benefit Period.	
Outpatient Therapy Services		
Physical Therapy	$25 Copayment Amount per visit, then 75% of Allowed Charge. Deductible Amount is waived.	$20 Copayment Amount per visit, then 80% of Allowed Charge. Deductible Amount is waived.
	Benefits are subject to the medical guidelines established by BCBSND.	

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
Occupational Therapy	$25 Copayment Amount per visit, then 75% of Allowed Charge. Deductible Amount is waived.	$20 Copayment Amount per visit, then 80% of Allowed Charge. Deductible Amount is waived.
	Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.	
Speech Therapy	$25 Copayment Amount per visit, then 75% of Allowed Charge. Deductible Amount is waived.	$20 Copayment Amount per visit, then 80% of Allowed Charge. Deductible Amount is waived.
	Benefits are available for 90 consecutive calendar days per condition, beginning on the date of the first therapy treatment for the condition. Additional benefits may be allowed after the 90 days when Medically Appropriate and Necessary.	
Respiratory Therapy Services	75% of Allowed Charge.	80% of Allowed Charge.
Cardiac Rehabilitation Services	75% of Allowed Charge. Deductible Amount is waived.	80% of Allowed Charge. Deductible Amount is waived.
	Benefits are subject to a Maximum Benefit Allowance of 12 visits per Member per episode for the following diagnosed medical conditions: • Myocardial Infarction • Coronary Artery Bypass Surgery • Coronary Angioplasty and Stenting • Heart Valve Surgery • Heart Transplant Surgery Cardiac Rehabilitation Services must begin within 2 months following discharge from the Hospital.	
Pulmonary Rehabilitation Services	75% of Allowed Charge. Deductible Amount is waived.	80% of Allowed Charge. Deductible Amount is waived.
	Benefits are subject to a Lifetime Maximum of 3 visits per Member.	

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
Chiropractic Services	Only the Office Visit Copayment Amount will apply if both an Office Visit and Therapy/Manipulation are billed on the same day by the same Health Care Provider.	
• Home and Office Visits	$30 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.	$25 Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount is waived.
• Therapy and Manipulations	$25 Copayment Amount per visit, then 75% of Allowed Charge. Deductible Amount is waived.	$20 Copayment Amount per visit, then 80% of Allowed Charge. Deductible Amount is waived.
• Diagnostic Services	75% of Allowed Charge.	80% of Allowed Charge.
Maternity Services	The Deductible Amount is waived for delivery services received from a PPO Health Care Provider when the Member is enrolled in the Prenatal Plus Program.	
• Inpatient Hospital and Medical Services	75% of Allowed Charge.	80% of Allowed Charge.
• Prenatal and Postnatal Care	75% of Allowed Charge. Deductible Amount is waived.	80% of Allowed Charge. Deductible Amount is waived.
• 1 Prenatal Nutritional Counseling visit per pregnancy	100% of Allowed Charge. Deductible Amount is waived.	100% of Allowed Charge. Deductible Amount is waived.
Infertility Services	80% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a $500 Lifetime Infertility Services Deductible Amount and a $20,000 Lifetime Maximum per Member. This Coinsurance Amount and the Infertility Services Deductible Amount do not apply toward the Out-of-Pocket Maximum Amount. Prior Approval is required.	
Psychiatric and Substance Abuse Services		
• Inpatient Services	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to an aggregate Maximum Benefit Allowance of 45 days per Member per Benefit Period. Preauthorization is required.	
• Detoxification Services	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a Maximum Benefit Allowance of 5 days per Admission. Days of detoxification care will reduce available inpatient benefits.	

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
• Ambulatory Behavioral Health Care (Partial Hospitalization) Services	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to an aggregate Maximum Benefit Allowance of 120 days per Member per Benefit Period. Preauthorization is required.	
• Psychiatric Residential Treatment Services for Members under age 21	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a Maximum Benefit Allowance of 120 days per Member per Benefit Period. Available inpatient days may be traded for additional days of Residential Treatment services. Each day of available inpatient service is equivalent to 2 days of Residential Treatment services. However, no more than 23 days of available inpatient services may be traded for additional Residential Treatment services. Preauthorization is required.	
• Substance Abuse Residential Treatment Services	75% of Allowed Charge.	80% of Allowed Charge.
	Benefits are subject to a Maximum Benefit Allowance of 60 days per Member per Benefit Period. Available inpatient days may be traded for additional days of Residential Treatment services. Each day of available inpatient service is equivalent to 2 days of Residential Treatment services. However, no more than 23 days of available inpatient services may be traded for additional Residential Treatment services. Preauthorization is required.	
• Outpatient Services		
Psychiatric Services	Benefits are available up to 30 hours per Member per Benefit Period. Deductible Amount is waived and benefits are payable at 100% of Allowed Charge for the first 5 hours.	
	Benefits for the remaining 25 hours are subject to the Deductible Amount and are payable at 80% of Allowed Charge.	Benefits for the remaining 25 hours are subject to the Deductible Amount and are payable at 80% of Allowed Charge.
Group Psychotherapy Services	Two hours of group psychotherapy reduce available outpatient psychiatric benefits by 1 hour.	
Substance Abuse Services	Benefits are available up to 20 visits per Member per Benefit Period. Deductible Amount is waived and benefits are payable at 100% of Allowed Charge for the first 5 visits.	
	Benefits for the remaining 15 visits are subject to the Deductible Amount and are payable at 80% of Allowed Charge.	Benefits for the remaining 15 visits are subject to the Deductible Amount and are payable at 80% of Allowed Charge.
Group Psychotherapy Services	Two group psychotherapy visits reduce available outpatient substance abuse benefits by 1 visit.	
Ambulance Services	75% of Allowed Charge.	80% of Allowed Charge.

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount
Skilled Nursing Facility Services	75% of Allowed Charge.	80% of Allowed Charge.
Home Health Care Services	75% of Allowed Charge.	80% of Allowed Charge.
Hospice Services	75% of Allowed Charge.	80% of Allowed Charge.
Private Duty Nursing Services	75% of Allowed Charge.	80% of Allowed Charge.
Medical Supplies and Equipment	75% of Allowed Charge.	80% of Allowed Charge.
• Home Medical Equipment • Prosthetic Appliances • Orthotic Devices • Supplies for Administration of Prescription Medications other than the diabetes supplies specified in Outpatient Prescription Medications or Drugs • Oxygen Equipment and Supplies • Ostomy Supplies	Benefits are subject to a Maximum Benefit Allowance of $6,000 per Member per Benefit Period.	
• Hearing aids for Members under age 18	Subject to a $3,000 Maximum Benefit Allowance per Member every 3 years. Prior Approval is required. This benefit is also subject to the Medical Supplies and Equipment Maximum Benefit Allowance.	
• Prosthetic Limbs	Subject to a Maximum Benefit Allowance every 5 years of $6,000 per limb above or below the elbow and $16,000 per limb above or below the knee. This benefit is not subject to the Medical Supplies and Equipment Maximum Benefit Allowance.	
Eyeglasses or Contact Lenses (following a covered cataract surgery)	75% of Allowed Charge. Benefits are subject to a Maximum Benefit Allowance of 1 pair of eyeglasses or contact lenses per Member when purchased within 6 months following the surgery.	80% of Allowed Charge.

Covered Services	Provider of Service: Basic Plan After Deductible Amount	Provider of Service: PPO Plan After Deductible Amount

Outpatient Prescription Medications or Drugs and Diabetes Supplies

Retail and Mail Order

- Formulary Drug

Generic	$5 Copayment Amount, then 85% of Allowed Charge. Benefits are subject to the Outpatient Prescription Medication or Drug Coinsurance Maximum Amount and the Copayment Amount application listed below. Deductible Amount is waived.
Brand Name	$20 Copayment Amount, then 75% of Allowed Charge. Benefits are subject to the Outpatient Prescription Medication or Drug Coinsurance Maximum Amount and the Copayment Amount application listed below. Deductible Amount is waived.

- Nonformulary Drug — $25 Copayment Amount, then 50% of Allowed Charge. Benefits are subject to the Copayment Amount application listed below. Deductible Amount is waived.

Copayment Amount Application:

One Copayment Amount per Prescription Order or refill for a 1 – 34-day supply.
Two Copayment Amounts per Prescription Order or refill for a 35 – 100-day supply.

Copayment Amounts do not apply to the following nonprescription diabetes supplies: syringes, lancets, blood glucose test strips, urine test products and control solutions.

If a Generic Prescription Medication or Drug is the therapeutic equivalent for a Brand Name Prescription Medication or Drug, and is authorized by a Member's Professional Health Care Provider, benefits will be based on the Allowance for the Generic equivalent. If the Member does not accept the Generic equivalent the Member is responsible for the cost difference between the Generic and the Brand Name Prescription Medication or Drug and applicable Cost Sharing Amounts.

Prescription Medication or Drug Cost Sharing Amounts do not apply toward the Out-of-Pocket Maximum Amount.

Prescription Medications or Drugs and nonprescription diabetes supplies are subject to a dispensing limit of a 100-day supply.

The Copayment Amounts are waived for prenatal vitamins when the Member is enrolled under the Prenatal Plus Program.

SECTION 2
COVERED SERVICES

This section describes the services for which benefits are available for Medically Appropriate and Necessary services under this Benefit Plan, subject to the definitions, exclusions, conditions and limitations of this Benefit Plan, Cost Sharing Amounts, Maximum Benefit Allowances and Lifetime Maximums described in the Schedule of Benefits and Benefit Plan Attachment.

BCBSND shall determine the interpretation and application of the Covered Services in each and every situation.

2.1 INPATIENT HOSPITAL AND MEDICAL SERVICES

Preauthorization may be required for Inpatient Hospital Admissions. See Section 3, Managed Benefits.

A. Inpatient Hospital Services include:

1. Bed, board and general nursing services.

2. Special Care Units when Medically Appropriate and Necessary.

3. Long Term Acute Care Facility, Rehabilitation Facility or Transitional Care Unit when Medically Appropriate and Necessary.

4. Ancillary Services when Medically Appropriate and Necessary, Including:

   a. use of operating, delivery and treatment rooms;
   b. prescribed drugs;
   c. blood, blood substitutes and the administration of blood and blood processing;
   d. anesthesia and related supplies and services provided by an employee of or a person under contractual agreement with a Hospital;
   e. medical and surgical dressings, supplies, casts and splints;
   f. Diagnostic Services; and
   g. Therapy Services.

5. Dental anesthesia and hospitalization for dental care to Members under age 9, Members who are severely disabled or Members who have a medical condition that requires hospitalization or general anesthesia. Prior Approval is required for all Members age 9 and older.

B. Inpatient Medical Services include:

1. Inpatient medical care visits by a Professional Health Care Provider, except inpatient stays related to surgery or maternity care. See Section 2.2, Inpatient and Outpatient Surgical Services and Section 2.9, Maternity Services. Benefits are available for inpatient medical care visits for the treatment of mental illness or substance abuse only when provided in conjunction with a covered inpatient psychiatric or substance abuse Admission.

2. Consultation services by another Professional Health Care Provider at the request of the attending Professional Health Care Provider for the purpose of advice, diagnosis or instigation of treatment requiring special skill or knowledge. Benefits are available only if a written report from a consultant is a part of the Member's medical records. Consultation benefits do not include staff consultations required by hospital rules and regulations.

3. Concurrent services Including medical, surgical, maternity, Chemotherapy or Radiation Therapy provided during one inpatient stay by one Professional Health Care Provider. Benefits for concurrent services will be based on the Covered Service with the highest Allowance.

When two or more Professional Health Care Providers have attended the Member during one inpatient stay because the nature or severity of the Member's condition requires the skills of separate Professional Health Care Providers, benefits will be available for the Covered Service that carries the highest Allowance for the type of service provided by each Professional Health Care Provider, provided the service is Medically Appropriate and Necessary and would otherwise be a Covered Service under this Benefit Plan.

4. Routine nursery care and the initial inpatient examination of the newborn child by a Professional Health Care Provider, if the newborn child is a Member. The newborn child is also entitled to benefits from the moment of birth for any illness, accident, deformity or congenital conditions.

2.2 INPATIENT AND OUTPATIENT SURGICAL SERVICES

A. Inpatient Surgical Services include:

1. Surgical Services provided by a Professional Health Care Provider. Separate benefit payments will not be made for preoperative and postoperative services. Payment for these services is included in the surgical fee.

2. Assistant surgeon services by a Professional Health Care Provider who actively assists the operating surgeon in the performance of covered surgery if the type of surgery performed requires an assistant, as determined by BCBSND, and no Hospital or Ambulatory Surgical Facility staff is available to provide such assistance.

3. Administration of Medically Appropriate and Necessary anesthesia for a covered surgical procedure when ordered by the attending Professional Health Care Provider and provided by or under the direct supervision of an Anesthesiologist or Professional Health Care Provider other than the operating surgeon or the assistant surgeon.

B. The benefits described above are also available for Outpatient Surgical Services in addition to:

1. Supplies used for a covered surgical procedure when performed in a Professional Health Care Provider's office, clinic or Ambulatory Surgical Facility.

2. Facility charges for covered outpatient Surgical Services performed in an Ambulatory Surgical Facility.

3. Hospital Ancillary Services and supplies used for a covered outpatient surgery, Including removal of sutures, anesthesia and related supplies and services when provided by an employee of or under contractual agreement with the Hospital, other than the surgeon or assistant at surgery.

C. Benefits are available for the following special surgeries:

1. Reconstructive surgery to restore bodily function or correct deformity resulting from disease, trauma, congenital or developmental anomalies or previous therapeutic processes.

   Benefits include reconstructive breast surgery performed as a result of a partial or total mastectomy subject to Benefit Plan Cost Sharing Amounts. Benefits also include reconstructive breast surgery on the nondiseased breast to establish symmetry with the reconstructed diseased breast. Benefits for prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas, are allowed under Section 2.17, Medical Supplies and Equipment. Benefits will be allowed in a manner determined in consultation with the attending Professional Health Care Provider and the Member.

   Cosmetic surgery will not qualify as reconstructive surgery when performed for the treatment of a psychological or psychiatric condition.

2. Sterilization procedures. Procedures to evaluate and reverse sterilization are not covered under this Benefit Plan.

3. Surgery for morbid obesity when Prior Approval is received from BCBSND. Benefits are subject to a Lifetime Maximum of 1 operative procedure for morbid obesity per Member. Guidelines and criteria are available upon request.

   No benefits are available for the repair or modification of any or all types of surgical morbid obesity procedures, except a Lifetime Maximum of 1 revision will be allowed per Member due to technical staple line failure. Benefits for all proposed surgical procedures for the treatment of complications resulting from any or all types of surgical morbid obesity procedures are available only when Prior Approval is received from BCBSND.

2.3 TRANSPLANT SERVICES

A. Subject to the exclusions of this Benefit Plan, benefits are available for the following transplant procedures based on medical criteria if the recipient is a Member under this Benefit Plan. Benefits are not available under this Benefit Plan if the Member is the donor for transplant services. Benefits are subject to a Lifetime Maximum of 2 transplant procedures for the same condition. Prior Approval is required.

1. Heart
2. Heart-lung
3. Lung (single or double)
4. Liver
5. Pancreas
6. Small bowel
7. Kidney - Prior Approval is not required. Preauthorization may be required, see Section 3.2.
8. Cornea - Prior Approval is not required. Preauthorization may be required, see Section 3.2.
9. Bone marrow transplants or other forms of stem cell rescue with related services and supplies are covered only in the following cases and in no others:

   a. Autologous Bone Marrow Transplants and Autologous peripheral stem cell transplants are only allowed for the following diagnoses: Non-Hodgkin's lymphoma, Stage III or IV; Hodgkin's Disease (lymphoma) Stage III or IV; Neuroblastoma, Stage III or IV; Acute lymphocytic or non-lymphocytic leukemia in first or subsequent remission; Multiple myeloma; Metastatic (Stage IV) breast cancer; and Germ Cell tumors.

   b. Allogeneic Bone Marrow Transplants are only allowed for the following diagnoses: Non-Hodgkin's lymphoma, Stage III or IV; Hodgkin's Disease (lymphoma) Stage III or IV; Neuroblastoma, Stage III or IV; Chronic myelogenous leukemia in blast crisis or chronic phase; and Acute lymphocytic or non-lymphocytic leukemia (acute myelocytic leukemia) in first or subsequent remission, but at high risk for relapse.

   c. Allogeneic Bone Marrow Transplants for Non-Malignancies are only allowed for the following diagnoses: Severe aplastic anemia; Homozygous Beta-Thalassemia; Wiskott-Aldrich Syndrome; Severe combined immunodeficiencies; Infantile malignant osteopetrosis; Mucopolysaccharidoses; Mucolipidoses; Myelodysplastic Syndromes; Kostmann's Syndrome; Leukocyte adhesion deficiencies; X-linked lymphoproliferative syndrome; and Myeloproliferative disorders.

Please contact BCBSND to ensure benefits are available for specific transplant procedures. In administering this Benefit Plan, as technology changes medical policy or medical guidelines for these services may be modified as appropriate.

If a Member chooses to receive Covered Services from a program not approved by BCBSND, the Member will be responsible for any charges over the Allowance.

B. Covered Services include:

1. One evaluation is allowed per transplant procedure. Services must be performed at a qualified transplant center.

2. Inpatient and outpatient Hospital and Medical Services for the recipient and the donor, if the living donor is not eligible for any other medical coverage.

3. Surgical Services Including the evaluation and removal of the donor organ as well as transplantation of the organ or tissue into the recipient. Separate payment will not be made for the removal of an organ for transplantation at a later date.

4. Compatibility testing services provided to the donor.

5. Supportive medical procedures and clinical management services, Including postoperative procedures to control rejection and infection.

6. Transportation costs by air ambulance, commercial carrier or charter when a Member must be transported within a restricted time frame to obtain a covered transplant procedure. Benefits are subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1.

C. Benefits are not available for artificial organs, donor search services or organ procurement if the organ or tissue is not donated.

2.4 TEMPOROMANDIBULAR OR CRANIOMANDIBULAR JOINT TREATMENT

Temporomandibular (TMJ) or craniomandibular (CMJ) joint treatment, Including surgical and nonsurgical services, when such care and treatment is Medically Appropriate and Necessary as determined by BCBSND. Benefits are subject to the Lifetime Maximum listed in the Schedule of Benefits, Section 1.

2.5 OUTPATIENT HOSPITAL AND MEDICAL SERVICES

Outpatient Hospital and Medical Services include:

A. Home and Office Visits and consultations for the examination, diagnosis and treatment of an illness or injury, Including administered Prescription Medications or Drugs.

B. Diagnostic Services when ordered by a Professional Health Care Provider.

C. Emergency Services.

D. Dental services provided by a Dentist (D.D.S.) in an office setting as a result of an accidental injury to the jaw, sound natural teeth, dentures, mouth or face. Covered Services must be initiated within 12 months of the date of injury and completed within 24 months of the start of treatment or longer if a dental treatment plan approved by BCBSND is in place. An accidental injury is defined as an injury that is the result of an external force causing a specific impairment to the jaw, sound natural teeth, dentures, mouth or face. Injury as a result of chewing or biting is not considered an accidental injury.

E. Surgical preadmission testing for Medically Appropriate and Necessary preoperative tests and studies provided on an outpatient basis prior to a Member's scheduled Admission to the Hospital as an Inpatient for surgery.

   Benefits are available only under the following conditions:

   1. The tests or studies would have been provided on an inpatient basis for the same condition; and

   2. The tests or studies are not repeated upon the Member's Admission to the Hospital.

F. Second surgical opinion consultations on covered elective surgery recommended by a Health Care Provider and those directly related Diagnostic Services required for a valid second surgical opinion. A second surgical opinion must be provided by a Professional Health Care Provider qualified to perform the suggested surgery and whose practice is unrelated to the Member's original Health Care Provider.

G. Radiation and Chemotherapy Services, except as limited by this Benefit Plan.

H. Dialysis Treatment.

I. Home Infusion Therapy services. Covered Services include the provision of nutrients, antibiotics, and other drugs and fluids intravenously, through a feeding tube, or by inhalation; all Medically Appropriate and Necessary supplies; and therapeutic drugs or other substances. Covered Services also include Medically Appropriate and Necessary enteral feedings when such feedings are the sole source of nutrition for a Member.

J. Visual training services, Including orthoptics and pleoptic training, provided to Members under age 10 for the treatment of amblyopia. Benefits are subject to the Lifetime Maximum listed in the Schedule of Benefits, Section 1.

K. Allergy Services, Including serum, direct skin testing and patch testing when ordered by a Professional Health Care Provider and performed in accordance with medical guidelines and criteria established by BCBSND. Guidelines and criteria for Medically Appropriate and Necessary services are available from a Participating Health Care Provider or BCBSND.

L. Foods and food products for the dietary treatment of Members born after 12/31/62 with maple syrup urine disease or phenylketonuria (PKU) subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. The following foods and food products are available:

   1. Low protein modified food product means a food product that is specially formulated to have less than one gram of protein per serving and is intended to be used under the direction of a Physician for the dietary treatment of an inherited metabolic disease. The term does not include a natural food that is naturally low in protein.

   2. Medical food means a food that is intended for the dietary treatment of a disease or condition for which nutritional requirements are established by medical evaluation and is formulated to be consumed or administered under the direction of a Physician.

M. Dental anesthesia and hospitalization for dental care to Members under age 9, Members who are severely disabled or Members who have a medical condition that requires hospitalization or general anesthesia. Prior Approval is required for all Members age 9 and older.

N. Outpatient nutrition care services provided by a Licensed Registered Dietitian when ordered by a Professional Health Care Provider. Covered Services include assessment of food practices and dietary/nutritional status and diet counseling for preventive and therapeutic needs for the diagnosed medical conditions listed in the Schedule of Benefits, Section 1.

2.6 WELLNESS SERVICES

A. Well child care and immunizations for Members to their 6th birthday in accordance with the schedule listed in the Schedule of Benefits, Section 1.

B. Preventive screening services for Members age 6 and older as listed in the Schedule of Benefits, Section 1. A Health Care Provider will counsel Members as to how often preventive services are needed based on the age, gender and medical status of the Member.

C. Mammography screening services in accordance with the schedule listed in the Schedule of Benefits, Section 1.

D. One routine pap smear per Member per Benefit Period. Benefits include the related Office Visit.

E. Prostate cancer screening services subject to the guidelines listed in the Schedule of Benefits, Section 1. Benefits include the related Office Visit.

F. Fecal occult blood testing for colorectal cancer screening subject to the guidelines listed in the Schedule of Benefits, Section 1.

G. Immunizations other than well child care as listed in the Schedule of Benefits, Section 1.

H. Diabetes care services include Outpatient Home and Office Visits, Diagnostic Services, Outpatient Nutrition Care Services, Diabetes Education Services, Dilated Eye Examinations and Outpatient Prescription Medications or Drugs and Diabetes Supplies. Benefits are subject to the Maximum Benefit Allowances as listed in the Schedule of Benefits, Section 1.

2.7 OUTPATIENT THERAPY SERVICES

A. Physical Therapy: Benefits will be based on a predetermined number of visits (also referred to as “window periods”) according to the condition. Additional visits beyond the window period require Preauthorization from BCBSND. See Section 3, Managed Benefits. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider. Benefits are not available for Maintenance Care.

B. Occupational Therapy: Benefits are available as listed in the Schedule of Benefits, Section 1, when performed by or under the direct supervision of a licensed Occupational Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider. Benefits are not available for Maintenance Care.

C. Speech Therapy: Benefits are available as listed in the Schedule of Benefits, Section 1, when performed by or under the direct supervision of a certified and licensed Speech Therapist. Services must be provided in accordance with a prescribed plan of treatment ordered by a Professional Health Care Provider. Benefits are not available for Maintenance Care.

D. Respiratory Therapy services performed by or under the direct supervision of a registered respiratory care practitioner for the treatment, management, control and care of patients with deficiencies and abnormalities of the cardiorespiratory system. Services must be provided in accordance with an order from a Professional Health Care Provider.

E. Cardiac rehabilitation services subject to the criteria listed in the Schedule of Benefits, Section 1.

F. Pulmonary rehabilitation services subject to the Lifetime Maximum listed in the Schedule of Benefits, Section 1.

2.8 CHIROPRACTIC SERVICES

Chiropractic services provided on an inpatient or outpatient basis when Medically Appropriate and Necessary as determined by BCBSND and within the scope of licensure and practice of a Chiropractor, to the extent services would be covered if provided by a Physician. Benefits are not available for maintenance care.

2.9 MATERNITY SERVICES

Benefits are available for Covered Services for pregnancy and complications of pregnancy. Benefits are limited to 1 ultrasound per pregnancy unless, based on the Member's condition and history, additional services are determined to be Medically Appropriate and Necessary.

Benefits for inpatient maternity services allow a minimum stay of 48 hours for a vaginal delivery and 96 hours for a cesarean delivery. The Health Care Provider, after consulting with the mother, may discharge the mother and newborn earlier than 48 hours following a vaginal delivery or 96 hours following a cesarean section.

Benefits for Outpatient Nutrition Care Services for Gestational Diabetes are available. See Outpatient Nutrition Care Services in the Schedule of Benefits, Section 1.

If the newborn child is a Member, benefits are available from the moment of birth for routine nursery care and the treatment of any illness, accident, deformity or congenital condition.

Prenatal nutritional counseling is limited to one prenatal visit per pregnancy.

Prenatal Plus Program

The prenatal plus program is designed to identify women at higher risk for premature birth and to prevent the incidence of preterm birth through assessment, intervention and education. Participation in the prenatal plus program is voluntary.

To participate, the Member must notify a Member Services representative after the first prenatal visit; preferably before the 12th week, and no later than the 34th week. The number to call regarding prenatal plus is on the back of the Identification Card. A Member Services representative will obtain the Member's name, Benefit Plan Number and telephone number and request a medical management representative contact the Member.

A medical management representative will review the preterm labor risk assessment questionnaire with the Member. The questionnaire will take approximately ten minutes to complete. The information needed to complete this form is the Member's Benefit Plan Number, Professional Health Care Provider's name, address and telephone number and the Member's expected due date.

As a program participant, the Member will receive a packet containing information concerning pregnancy and prenatal care.

When a Member is enrolled under the prenatal plus program, the Deductible Amount is waived for delivery services received from a PPO Health Care Provider.

The Copayment Amount for prenatal vitamins is waived when the Member is enrolled under the prenatal plus program.

2.10 INFERTILITY SERVICES

Benefits are available for services, supplies and drugs related to artificial insemination (AI) and assisted reproductive technology (ART), Including gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), intracytoplasmic sperm injection (ICSI) or in vitro fertilization (IVF), subject to the Cost Sharing Amounts and Lifetime Maximum listed in the Schedule of Benefits, Section 1. Guidelines and criteria for Medically Appropriate and Necessary services are available from BCBSND. In administering this Benefit Plan, as technology changes medical policy or medical guidelines for these services may be modified as appropriate.

Prior Approval is required for assisted reproductive technology for GIFT, ZIFT, ICSI and IVF.

2.11 PSYCHIATRIC AND SUBSTANCE ABUSE SERVICES

A. Inpatient Services

Benefits are available for the inpatient treatment of mental illness and substance abuse when provided by a Hospital, Psychiatric Care Facility or Substance Abuse Facility subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Preauthorization is required.

All out-of-state Admissions require Prior Approval from BCBSND.

B. Detoxification Services

In the case of an Admission for detoxification only, benefits will be limited to 5 days per Admission unless further acute care is Medically Appropriate and Necessary. Days of detoxification care will reduce the benefit for inpatient services whether services are provided in an acute Hospital setting or a Substance Abuse Facility.

C. Ambulatory Behavioral Health Care (Partial Hospitalization) Services

Benefits are available for Ambulatory Behavioral Health Care Services received through a Partial Hospitalization or intensive outpatient program for mental illness and substance abuse subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Preauthorization is required.

D. Psychiatric Residential Treatment Services

Benefits are available for Residential Treatment services received through a Residential Treatment program subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Preauthorization is required.

E. Substance Abuse Residential Treatment Services

Benefits are available for Residential Treatment services received through a Residential Treatment program subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Preauthorization is required.

F. Outpatient Psychiatric Services

Benefits are available subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Benefits include diagnostic, evaluation and treatment services when provided by a Physician, Licensed Clinical Psychologist, Licensed Independent Clinical Social Worker and treatment services provided by a Psychiatric Nurse.

Group psychotherapy services received by a Member through a program approved by BCBSND. Two hours of group psychotherapy reduce available outpatient psychiatric benefits by 1 hour.

G. Outpatient Substance Abuse Services

Benefits are available subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Benefits include diagnostic, evaluation and treatment services provided by a Physician, Licensed Clinical Psychologist or Licensed Addiction Counselor.

Group psychotherapy services received by a Member through a program approved by BCBSND. Two group psychotherapy visits reduce available outpatient substance abuse benefits by 1 visit.

H. **BCBSND may designate an out-of-state Health Care Provider as Nonpayable.**

I. Depending upon the type and extent of psychiatric or substance abuse services, BCBSND may invite the parents or guardians of a Member under age 18 to participate in a voluntary program involving an evaluation of the Member by a care coordinator. Based on the outcome of the evaluation, the care coordinator may recommend modifications in the treatment plan, which may include an expansion of reimbursable services. This program has been developed as part of a pilot program by the North Dakota Department of Health, the Mental Health Association of North Dakota and BCBSND.

2.12 AMBULANCE SERVICES

Medically Appropriate and Necessary Ambulance Services to the nearest facility equipped to provide the required level of care, including transportation:

- from the home or site of an Emergency Medical Condition.
- between Hospitals.
- between a Hospital and Skilled Nursing Facility.

Benefits for air transportation are available only when ground transportation is not Medically Appropriate and Necessary as determined by BCBSND.

2.13 SKILLED NURSING FACILITY SERVICES

The benefits available under this Benefit Plan for Inpatient Hospital and Medical Services are also available for Skilled Nursing Services and supplies customarily provided to an Inpatient of a Skilled Nursing Facility when the condition requires daily Skilled Nursing Services that are Medically Appropriate and Necessary and such services can only be provided in a Skilled Nursing Facility. Preauthorization is required. Benefits are not available for Maintenance Care or Custodial Care.

2.14 HOME HEALTH CARE SERVICES

Home Health Care when provided to an essentially homebound Member in the Member's place of residence. The services must be provided on a part-time visiting basis according to a Professional Health Care Provider's prescribed plan of treatment approved by BCBSND prior to Admission to Home Health Care. Benefits are available only if, in the absence of Home Health Care, the Member would require Inpatient Hospital or Skilled Nursing Facility Services. Preauthorization is required.

A. Covered Services include:

1. The professional services of an R.N., Licensed Vocational Nurse or L.P.N.;
2. Physical, Occupational or Speech Therapy;
3. Medical and surgical supplies;
4. Administration of prescribed drugs;
5. Oxygen and the administration of oxygen; and
6. Health aide services for a Member who is receiving covered Skilled Nursing Services or Therapy Services.

B. No Home Health Care benefits will be provided for:

1. Dietitian services;
2. Homemaker services;
3. Social worker services;
4. Maintenance Care;
5. Custodial Care;
6. Food or home delivered meals;
7. Respite care; or
8. Home Health Care or supplies for Members who are ventilator dependent unless a skilled nursing facility bed is not available. In the event a skilled nursing facility bed is not available, the Maximum Benefit Allowance for Home Health Care Services will be the average daily room rate for a skilled nursing bed.

2.15 HOSPICE SERVICES

The benefits available under this Benefit Plan for Inpatient Hospital and Medical Services, Outpatient Hospital and Medical Services, Therapy Services, Skilled Nursing Facility Services, Home Health Care Services and Private Duty Nursing Services are also available when coordinated or provided through an organized and approved hospice program. Hospice benefits are provided only for the treatment of Members diagnosed with a condition where there is a life expectancy of 6 months or less. Preauthorization is required.

2.16 PRIVATE DUTY NURSING SERVICES

Private Duty Nursing Services provided by an actively practicing Registered Nurse (R.N.) or Licensed Practical Nurse (L.P.N.) when ordered by a Professional Health Care Provider. The nurse must not ordinarily reside in the Member's home or be a member of the Member's Immediate Family. Benefits are not available for Maintenance Care.

2.17 MEDICAL SUPPLIES AND EQUIPMENT

Benefits are available for Medically Appropriate and Necessary medical supplies and equipment subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1.

A. Home Medical Equipment

The rental or purchase, at the option of BCBSND of new, used or refurbished Home Medical Equipment, Including wheelchairs, hospital-type beds, infusion pumps and related supplies, crutches and canes when prescribed by a Professional Health Care Provider and Medically Appropriate and Necessary. The rental cost shall not exceed the Allowance of such equipment. No benefits are available for motorized equipment, except wheelchairs when Prior Approval is received from BCBSND. No benefits are available for batteries required for Home Medical Equipment, except for wheelchair batteries. Covered Services include replacement and repairs when Medically Appropriate and Necessary.

Benefits will not be provided for any Home Medical Equipment required for leisure or recreational activity or to allow a Member to participate in a sport activity.

B. Prosthetic Appliances

The purchase, fitting and necessary adjustments of Prosthetic Appliances and supplies that replace all or part of an absent body part. Benefits are available for standard Prosthetic Appliances only. Covered Services include replacement and repairs when Medically Appropriate and Necessary.

Benefits are not available for dental appliances, artificial organs or Prosthetic Appliances intended only for cosmetic purposes.

C. Orthotic Devices

Medically Appropriate and Necessary Orthotic Devices when ordered by a Professional Health Care Provider. Guidelines and criteria for Medically Appropriate and Necessary custom molded foot orthotics are available from BCBSND.

Benefits will not be provided for any Orthotic Devices required for leisure or recreational activity or to allow a Member to participate in a sport activity.

D. Supplies for Administration of Prescription Medications or Drugs

Therapeutic devices or appliances related to the administration of Prescription Medications or Drugs in the home, such as hypodermic needles and syringes. See Outpatient Prescription Medications or Drugs for diabetes supplies.

E. Oxygen

Administration of oxygen, Including the rental of equipment.

F. Ostomy Supplies

G. Hearing aids for Members under age 18 subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Prior Approval is required.

H. Prosthetic Limbs

The purchase, fitting and necessary adjustments of Prosthetic Limbs and supplies that replace all or part of an absent limb subject to the Maximum Benefit Allowance listed in the Schedule of Benefits, Section 1. Benefits are available for standard Prosthetic Limbs only. When 2 Prosthetic Limbs are received for the same body part, payment will be based on the Prosthetic Limb with the highest Allowance. No additional payment will be made for an alignment procedure, as the charges are included in the Allowance for the Prosthetic Limb. Covered Services include replacement and repairs when Medically Appropriate and Necessary. Prior Approval is required if replacement of a Prosthetic Limb is necessary before 5 years.

Benefits are not available for Prosthetic Limbs or components intended only for cosmetic purposes, deluxe prosthetic knees controlled by microprocessors or customized coverings for terminal devices. Benefits are not available for Prosthetic Limbs or components required for work-related tasks, leisure or recreational activities or to allow a Member to participate in sport activities.

2.18 EYEGLASSES OR CONTACT LENSES

One pair of eyeglasses or contact lenses if received within 6 months of a covered cataract surgery.

2.19 OUTPATIENT PRESCRIPTION MEDICATIONS OR DRUGS

Benefits are available for Prescription Medications or Drugs approved by BCBSND and that are Medically Appropriate and Necessary for the treatment of a Member and dispensed on or after the effective date of coverage. Benefits include the following nonprescription diabetes supplies: syringes, lancets, blood glucose test strips, urine test products and control solutions.

All FDA approved Prescription Medications or Drugs and diabetes supplies will be categorized by BCBSND as a Formulary Drug, Nonformulary Drug, Nonpayable Drug, Restricted Use Drug or Payable Over-the-Counter (OTC) Drug. Prior Approval may be required for Restricted Use Drugs. Benefits may vary based on the various categories. A list of the various categories of Prescription Medications or Drugs may be obtained by visiting our website at www.BCBSND.com or by calling Member Services. See the telephone number on the back of the Identification Card.

BCBSND utilizes a formulary listing. This listing contains both Brand Name and Generic Prescription Medications or Drugs. If a Member receives a Nonformulary Drug the Nonformulary Drug sanction will apply.

A Member may be responsible for payment of the Cost Sharing Amounts at the time the Prescription Medication or Drug is dispensed. A Participating Pharmacy agrees not to charge or collect any amount from the Member that exceeds the Cost Sharing Amounts. All claims must be submitted by the Participating Pharmacy. If the Member submits a Claim for Benefits when services are received at a Participating Pharmacy, charges in excess of the Allowed Charge are the Subscriber's responsibility.

If a Member receives Prescription Medications or Drugs from a Nonparticipating Pharmacy, the Member is responsible for payment of the Prescription Order or refill in full at the time it is dispensed and to submit appropriate reimbursement information to BCBSND. Payment for covered Prescription Medications or Drugs will be sent to the Subscriber. Any charges in excess of the Allowed Charge are the Subscriber's responsibility.

A Member may call the toll-free number on the Identification Card to obtain information on Pharmacies participating in the BCBSND Preferred Pharmacy Network.

SECTION 3
MANAGED BENEFITS

This section describes BCBSND's managed benefits programs and the Member's responsibilities under these programs. The Member's medical care is between the Member and the Member's Health Care Provider. **The ultimate decision on the Member's medical care must be made by the Member and the Member's Health Care Provider. BCBSND only has the authority to determine the extent of benefits available for Covered Services under this Benefit Plan.**

In an effort to control rising health care costs, BCBSND reserves the option to implement cost management and/or disease management programs. If a cost management and/or disease management program is implemented, BCBSND will establish policies and procedures governing the program.

A Member seeking Covered Services from a Health Care Provider requiring either Prior Approval or Preauthorization grants to that Health Care Provider authority to act on behalf of the Member as the Member's Authorized Representative. As an Authorized Representative, the Health Care Provider assumes responsibility to act on behalf of the Member in pursuing a Claim for Benefits or appeal of an adverse benefit determination from a Claim for Benefits. See Section 6, Claims for Benefits and Appeals.

The designation of a Health Care Provider as an Authorized Representative is limited in scope and not an assignment of benefits, nor does it grant the Health Care Provider any of the Member's rights and privileges under the terms of this Benefit Plan.

The managed benefits provisions of this Benefit Plan provide that care must be provided or authorized by the Network chosen by the Subscriber. The Network assumes responsibility for the coordination of a Member's health care needs and that the health care system is properly accessed and utilized. However, if a Member seeks care on a Self-Referral basis without an Authorized Referral from the Network, compliance with the following Managed Benefits Provisions becomes the responsibility of the Member.

3.1 PRIOR APPROVAL PROCESS

This Benefit Plan requires Members to obtain Prior Approval before benefits are available for specified services, Including:

A. assisted reproductive technology for GIFT, ZIFT, ICSI and IVF;
B. chronic pain management program;
C. cosmetic surgeries;
D. dental anesthesia and hospitalization for all Members age 9 and older;
E. electric wheelchairs;
F. growth hormone therapy/treatment;
G. hearing aids for Members under age 18;
H. human organ and tissue transplants, except kidney and cornea transplants;
I. insulin infusion pump;
J. intradiscal electrothermal therapy (IDET);
K. lung volume reduction surgery;
L. morbid obesity surgery;
M. obstructive sleep apnea treatment;
N. orthodontic services for the treatment of temporomandibular or craniomandibular joint disorders;
O. osseointegrated implants;
P. out-of-country services - all elective admissions and services received outside the United States;
Q. Prosthetic Limbs replacement within 5 years;
R. psychiatric or substance abuse Admissions out-of-state;
S. Restricted Use Drugs;
T. rhinoplasty;
U. sleep studies; and
V. weight loss Prescription Medications or Drugs.

To request Prior Approval, the Member or the Member's Health Care Provider, on the Member's behalf, must notify BCBSND of the Member's intent to receive services requiring Prior Approval. The Member's Health Care Provider must provide the necessary information to establish the requested services are Medically Appropriate and Necessary. This information must be submitted in writing from the Member's Health Care Provider.

A Member seeking Covered Services requiring Prior Approval designates the Authorized Representative to act and receive notices and information related to a Claim for Benefits on behalf of the Member pursuing a Claim for Benefits or appeal of an adverse benefit determination from a Claim for Benefits. The Member agrees that all information and notifications related to the Claim for Benefits requiring Prior Approval is to be directed solely to the Authorized Representative unless the Member specifically requests that any notices or information also be delivered to the Member.

Receipt of Prior Approval does not guarantee payment of benefits. All services provided are subject to further review by BCBSND to ensure the services are Medically Appropriate and Necessary. Benefits will be denied if the Member is not eligible for coverage under this Benefit Plan on the date services are provided or if services received are not Medically Appropriate and Necessary as determined by BCBSND. Benefits for authorized services are subject to the definitions, conditions, limitations and exclusions of this Benefit Plan.

Prior Approval is required prior to obtaining services.

Information on the guidelines and criteria for Prior Approval are available from Participating Health Care Providers and BCBSND upon written request.

3.2 PREAUTHORIZATION

Preauthorization to BCBSND is required by each Member or the Member's representative prior to services being provided for the following services:

- Inpatient Admissions to a Health Care Provider not participating with BCBSND;
- Skilled Nursing Facility;
- Long Term Acute Care Facility;
- Transitional Care Unit;
- Inpatient Admission to a Rehabilitation Facility;
- Hospice;
- Home Health Care; and
- Psychiatric and Substance Abuse Admissions, including Ambulatory Behavioral Health Care (Partial Hospitalization) or Residential Treatment. All out-of-state Admissions require Prior Approval from BCBSND. See Section 3.1.

Admissions for maternity services do not require Preauthorization.

If the Member's medical condition does not allow the Member to obtain Preauthorization due to an emergency Admission, the Member or the Member's representative is requested to notify BCBSND of the Admission during the next BCBSND business day or as soon thereafter as reasonably possible to obtain authorization.

Notification Responsibility

If a Member seeks Covered Services from a Health Care Provider that participates with BCBSND, the Participating Health Care Provider assumes responsibility for all Preauthorization requirements.

If a Member seeks Covered Services from a Health Care Provider that does not participate with BCBSND, compliance with Preauthorization requirements is the Member's responsibility.

BCBSND will issue a notice of authorization, partial authorization or denial of authorization following review of the Preauthorization request.

To inquire on the Preauthorization process, please contact Member Services at the telephone number and address on the back of the Identification Card.

A Member seeking Covered Services requiring Preauthorization designates the Authorized Representative to act and receive notices and information related to a Claim for Benefits on behalf of the Member pursuing a Claim for Benefits or appeal of an adverse benefit determination from a Claim for Benefits. The Member agrees that all information and notifications related to the Claim for Benefits requiring Preauthorization is to be directed solely to the Authorized Representative unless the Member specifically requests that any notices or information also be delivered to the Member.

Receipt of Preauthorization does not guarantee payment of benefits. All services provided are subject to further review by BCBSND to ensure the services are Medically Appropriate and Necessary. Benefits will be denied if the Member is not eligible for coverage under this Benefit Plan on the date services are provided or if services received are not Medically Appropriate and Necessary as determined by BCBSND. Benefits for authorized services are subject to the definitions, conditions, limitations and exclusions of this Benefit Plan.

3.3 CONCURRENT REVIEW

Concurrent review is the ongoing review of the Medical Appropriateness and Necessity of the required Admissions outlined in Section 3.2 to an Institutional Health Care Provider. BCBSND will monitor the inpatient Admission to determine whether benefits will be available for continued inpatient care.

If BCBSND determines benefits are not available because the continued stay is not Medically Appropriate and Necessary, BCBSND will provide notice to the Member, the Member's attending Professional Health Care Provider or the Institutional Health Care Provider. No benefits will be available for services received after the date provided in BCBSND's notice of the termination of benefits.

3.4 DISCHARGE PLANNING

Discharge planning is the process of assessing the availability of benefits after a hospitalization. BCBSND supports discharge planning by providing information on benefits available for those services determined to be Medically Appropriate and Necessary for the Member's continued care and treatment.

3.5 CASE MANAGEMENT

Case management is a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet an individual's health needs, using communication and available resources to promote quality, cost effective outcomes.

Cases are identified for possible case management involvement based on a request for review or the presence of a number of parameters, such as:

- admissions that exceed the recommended or approved length of stay;
- utilization of health care services that generates ongoing and/or excessively high costs;
- conditions that are known to require extensive and/or long term follow up care and/or treatment.

Benefits under case management may be provided if BCBSND determines that the services are Medically Appropriate and Necessary, cost effective and feasible and that the total benefits for services do not exceed the Lifetime Maximum that the Member would otherwise be entitled to under this Benefit Plan.

All decisions made by case management are based on the individual circumstances of that Member's case. Each case is reviewed on its own merits and any benefits provided are under individual consideration.

SECTION 4
EXCLUSIONS

No benefits are available for services listed in this section. The following list is not a complete list. In addition to these general exclusions, limitations and conditions there may be others that apply to specific Covered Services that can be found in the Covered Services section and elsewhere in this Benefit Plan. If a benefit or service is not covered, then all services, treatments, devices or supplies provided in conjunction with that benefit or service are not covered. Please read this section carefully before seeking services and submitting a Claim for Benefits. Please contact Member Services at the telephone number listed on the back of the Identification Card if you have any questions. BCBSND shall determine the interpretation and application of the Exclusions in each and every situation.

4.1 EXCLUSIONS

No benefits are available for:

1. Services not prescribed or performed by or under the direct supervision of a Professional Health Care Provider consistent with the Professional Health Care Provider's licensure and scope of practice.

2. Services provided and billed by a registered nurse (other than an Advanced Practice Registered Nurse), intern (professionals in training), licensed athletic trainer or other paramedical personnel.

3. Inpatient Admission services received prior to the effective date of the Member's eligibility under this Benefit Plan.

4. Special education, counseling, therapy or care for learning disorders or behavioral problems whether or not associated with a manifest mental disorder, mental retardation or other disturbance.

5. Sex therapy services or therapy for marital or family dysfunction.

6. Bereavement, codependency, marital dysfunction, family dysfunction, sex or interpersonal relationship counseling services.

7. Counseling services for the treatment of a gambling addiction or nicotine addiction.

8. Any drug, device, medical service, treatment or procedure that is Experimental or Investigative.

9. Services, treatments or supplies that BCBSND determines are not Medically Appropriate and Necessary.

10. Human organ and tissue transplants, except as specified in this Benefit Plan. Benefits are not available for donor organs or tissue other than human donor organs or tissue. Benefits are not available for autologous, allogeneic and syngeneic bone marrow transplants or other forms of stem cell rescue, together with all related services and supplies except as specifically allowed in the Covered Services Section of this Benefit Plan. In administering this Benefit Plan, as technology changes medical policy or medical guidelines for these services may be modified as appropriate.

    Related services and supplies include all services and supplies that BCBSND determines are not Medically Appropriate and Necessary for the patient's receipt of Chemotherapy or Radiation Therapy requiring stem cell support, and includes specifically and without limitation, Chemotherapy and Radiation Therapy when supported by transplant or other stem cell rescue procedures.

11. Chemotherapy or Radiation Therapy together with all related services and supplies when the dose or manner of administration is expected to result in damage to or suppression of the bone marrow, the blood or blood forming systems, warranting or requiring receipt by the patient of autologous, allogeneic, or syngeneic stem cells, or that are derived from the bone marrow or the peripheral blood, unless the procedure is specifically allowed in the Covered Services Section of this Benefit Plan.

    Related services and supplies include all services and supplies that BCBSND determines are not Medically Appropriate and Necessary for the patient's receipt of Chemotherapy or Radiation Therapy requiring stem cell rescue and includes specifically and without limitation, all forms of bone marrow transplant or peripheral stem cell transplant.

12. Services that are related to annual, periodic or routine examinations, except as specifically allowed in the Covered Services Section of this Benefit Plan.

13. Immunizations, testing or other services required for foreign travel.

14. Inpatient services performed primarily for diagnostic examinations, Physical Therapy, rest cure, convalescent care, Custodial Care, Maintenance Care or sanitaria care.

15. Services by a vocational residential rehabilitation center, a community reentry program, Halfway House or Group Home.

    For the purpose of this exclusion, the following definitions apply:

    Halfway House - a facility for the housing or rehabilitation of persons on probation, parole, or early release from correctional institutions, or other persons found guilty of criminal offenses or a facility for the housing or rehabilitation of alcoholics or drug dependent persons.

    Group Home - a facility for the housing or rehabilitation of developmentally, mentally or severely disabled persons that does not provide skilled or intermediate nursing care.

16. The surgical or nonsurgical treatment of temporomandibular (TMJ) or craniomandibular (CMJ) joint disorder(s) when charges exceed the limits covered by this Benefit Plan. No benefits will be provided for orthodontic services (except as determined Medically Appropriate and Necessary and when Prior Approval is received from BCBSND) or osseointegrated implant surgery or related services performed for the treatment of temporomandibular or craniomandibular joint disorder(s).

17. Treatment leading to or in connection with sex change or transformation surgery and related complications.

18. All contraceptive medications, devices, appliances, supplies and related services when used for contraception, Including contraceptive products that do not require a Prescription Order or dispensing by a Health Care Provider.

19. Evaluations and related procedures to evaluate sterilization reversal procedures and the sterilization reversal procedure.

20. Abortions, except for those necessary to prevent the death of the woman. No benefits are available for removal of all or part of a multiple gestation.

21. Donor eggs including any donor treatment and retrieval costs, donor sperm, cryopreservation or storage of unfertilized sperm or eggs, Surrogate pregnancy and delivery, Gestational Carrier pregnancy and delivery, and preimplantation genetic diagnosis testing.

    For the purpose of this exclusion, the following definitions apply:

    Gestational Carrier - an adult woman who enters into an agreement to have a fertilized egg, gamete, zygote or embryo implanted in her and bear the resulting child for intended parents, where the embryo is conceived by using the egg and sperm of the intended parents.

    Surrogate - an adult woman who enters into an agreement to bear a child conceived through assisted conception for intended parents.

22. Medications obtained without a Prescription Order or for any charges for the administration of legend drugs or insulin that may be self-administered unless such administration is Medically Appropriate and Necessary.

23. Medical treatment and dietary management programs for obesity, except as specifically allowed in the Covered Services Section of this Benefit Plan. Benefits for surgical services performed for the treatment of morbid obesity are available only when Prior Approval is obtained from BCBSND. Benefits are subject to a Lifetime Maximum of 1 operative procedure per Member. A Lifetime Maximum of 1 revision will be allowed per Member due to technical staple line failure. Benefits are not provided for repair or modification of a gastric bypass/banding procedure.

24. Surgery and related services primarily intended to improve appearance and not to restore bodily function or correct deformity resulting from disease, trauma, congenital or developmental anomalies or previous therapeutic processes.

25. Standby services provided or billed by a Health Care Provider.

26. Biofeedback services.

27. Acupuncture services.

28. All forms of thermography for all uses and indications.

29. Testicular prostheses regardless of the cause of the absence of the testicle.

30. Orthotic Devices, Including orthopedic shoes and Home Medical Equipment required for leisure or recreational activities or to allow a Member to participate in sport activities unless Medically Appropriate and Necessary and approved by BCBSND.

31. Palliative or cosmetic foot care, foot support devices (except custom made support devices) or subluxations of the foot, care of corns, bunions (except for capsular or bone surgery), calluses, toenails, fallen arches, weak feet, chronic foot strain and symptomatic complaints of the feet. Benefits are available for the care of corns, calluses and toenails when Medically Appropriate and Necessary for Members with diabetes or circulatory disorders of the legs or feet.

32. Dentistry or dental processes and related charges, Including extraction of teeth, dental appliances Including orthodontia placed in relation to a covered oral surgical procedure, removal of impacted teeth, root canal therapy or procedures relating to the structures supporting the teeth, gingival tissues or alveolar processes.

33. Eyeglasses or contact lenses and the vision examination for prescribing or fitting eyeglasses or contact lenses, except as specifically allowed in the Schedule of Benefits and Covered Services Sections of this Benefit Plan. No benefits are available for routine vision examinations. No benefits are available for refractive eye surgery when used in otherwise healthy eyes to replace eyeglasses or contact lenses.

34. Hearing aids or examinations for the prescription or fitting of hearing aids. Benefits are available for hearing aids for Members under age 18 when Prior Approval is received from BCBSND. No benefits are available for routine hearing examinations. No benefits are available for a tinnitus masker.

35. Services when benefits are provided by any governmental unit or social agency, except for Medicaid or when payment has been made under Medicare Part A or Part B. Medicare Part A and Part B will be considered the primary payor with respect to benefit payments unless otherwise required by federal law.

36. Illness or injury caused directly or indirectly by war or an act of war or sustained while performing military services, if benefits for such illness or injury are available under the laws of the United States or any political subdivision thereof.

37. Illness or bodily injury that arises out of and in the course of a Member's employment if benefits or compensation for such illness or injury are available under the provisions of a state workers' compensation act, the laws of the United States or any state or political subdivision thereof.

38. Loss caused or contributed by a Member's commission or attempted commission of a felony (except losses caused or contributed by an act of domestic violence or any health condition) or a Member's involvement in an illegal occupation following the Member's enrollment in this Benefit Plan.

39. Any services when benefits are provided by a dental or medical department maintained by or on behalf of an employer, mutual benefit association, labor union, trust, similar person or group.

40. Services provided by a Health Care Provider who is a member of the Member's Immediate Family.

41. The following allergy testing modalities: nasal challenge testing, provocative/neutralization testing for food and food additive allergies, leukocyte histamine release, Rebuck skin window test, passive transfer or Prausnitz-Kustner test, cytotoxic food testing, metabisulfite testing, candidiasis hypersensitivity syndrome testing, IgG level testing for food allergies, general volatile organic screening test and mauve urine test.

    The following methods of desensitization treatment: provocation/neutralization therapy for food/chemical or inhalant allergies by sublingual, intradermal and subcutaneous routes, Urine Autoinjections, Repository Emulsion Therapy, Candidiasis Hypersensitivity Syndrome Treatment or IV Vitamin C Therapy.

    This exclusion also includes clinical ecology, orthomolecular therapy, vitamins or dietary nutritional supplements, or related testing provided on an inpatient or outpatient basis.

42. Telephone consultations or charges for failure to keep a scheduled visit or charges for completion of any forms required by BCBSND.

43. Personal hygiene and convenience items, Including air conditioners, humidifiers or physical fitness equipment.

44. Health screening assessment programs or health education services, Including all forms of communication media whether audio, visual or written.

45. Health and athletic club membership or facility use, and all services provided by the facility, Including Physical Therapy, sports medicine therapy and physical exercise.

46. Electronic speech aids, artificial organs, donor search services or organ procurement if the organ or tissue is not donated.

47. Prosthetic Limbs or components intended only for cosmetic purposes, deluxe prosthetic knees controlled by microprocessors or customized coverings for terminal devices. Benefits are not available for Prosthetic Limbs or components required for work-related tasks, leisure or recreational activities or to allow a Member to participate in sport activities.

48. Physical Therapy Maintenance Care, Occupational Therapy Maintenance Care or Speech Therapy Maintenance Care, work hardening programs, prevocational evaluation, functional capacity evaluations or group speech therapy services.

49. Chiropractic maintenance care that is typically long-term, by definition not therapeutically necessary but is provided at preferably regular intervals to prevent disease, prolong life, promote health and enhance the quality of life. This includes care provided after maximum therapeutic improvement, without a trial of withdrawal of treatment, to prevent symptomatic deterioration or it may be initiated with patients without symptoms in order to promote health and to prevent further problems.

50. Complications resulting from noncovered services received by the Member.

51. Services prescribed by, performed by or under the direct supervision of a Nonpayable Health Care Provider.

52. Services that a Member has no legal obligation to pay in the absence of this or any similar coverage.

53. Cost Sharing Amounts.

54. Services when Prior Approval was required but not obtained.

55. Smoking deterrents.

56. Massage therapy provided by a masseuse or masseur.

57. Low protein modified food products or medical food for maple syrup urine disease or phenylketonuria (PKU), to the extent those benefits are available under a department of health program or other state agency.

58. Collection and storage of umbilical cord blood.

59. Services, treatments or supplies not specified as a Covered Service under this Benefit Plan.

SECTION 5
GENERAL PROVISIONS

5.1 TIME LIMIT ON CERTAIN DEFENSES

The validity of this Benefit Plan may not be contested, except for nonpayment of premiums, after it has been in force for 2 years, beginning on the individual Member's effective date. Further, the validity of this Benefit Plan may not be contested on the basis of a statement made relating to insurability by any Member after continuous coverage has been in force for 2 years during the Member's lifetime unless the statement is written and signed by such Member. This time limit does not apply to fraudulent misstatements.

5.2 MEMBER BILL AUDIT

Upon receiving notice of a claims payment from BCBSND, the Member is encouraged to audit their medical bills and notify BCBSND of any services which are improperly billed or services that the Member did not receive. If, upon audit of a bill an error of $40 or more is found, the Member will receive a minimum payment of $20 or 50% of the resulting savings for paid Covered Services up to a maximum payment of $500.

To obtain payment through the Member Bill Audit Program, the Subscriber must complete a Member Bill Audit Refund Request Form. Forms are available from Blue Cross Blue Shield of North Dakota's NDPERS Service Unit.

This program does not apply when the NDPERS Benefit Plan is the secondary payor on a claim.

5.3 STATUS OF MEMBER ELIGIBILITY

The Plan Administrator agrees to furnish BCBSND with any information required by BCBSND for the purpose of enrollment. Any changes affecting a Member's eligibility for coverage must be provided to BCBSND by the Plan Administrator and/or the Member immediately, but in any event the Plan Administrator and/or the Member shall notify BCBSND within 31 days of the change.

Statements made on membership applications are deemed representations and not warranties. No statements made on the membership application may be used in any contest unless a copy has been furnished to that person, or in the event of the death or incapacity of that person, to the individual's beneficiary or personal representative. The Subscriber is provided a copy of the membership application at the time of completion.

5.4 PHYSICAL EXAMINATIONS

BCBSND at its own expense may require a physical examination of the Member as often as necessary during the pendency of a Claim for Benefits and may require an autopsy in case of death if the autopsy is not prohibited by law.

5.5 LIMITATION OF ACTIONS

No legal action may be brought for payment of benefits under this Benefit Plan prior to the expiration of 60 days following BCBSND's receipt of a Claim for Benefits or later than 3 years after the expiration of the time within which notice of a Claim for Benefits is required by this Benefit Plan.

5.6 PREMIUM REFUND/DEATH OF THE SUBSCRIBER

In the event of the Subscriber's death, BCBSND will refund one-half month's premium if death occurred prior to the sixteenth of the month and all premiums paid beyond the month of the Subscriber's death, within 31 days after receiving notice of the death.

5.7 NOTIFICATION REQUIREMENTS AND SPECIAL ENROLLMENT PROVISIONS

A. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any mailing address change within 31 days of the change.

B. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) of any change in marital status within 31 days of the change.

1. If the Subscriber marries, Eligible Dependents may be added as a Member if a membership application is submitted within 31 days of the date of marriage. If the membership application is not submitted within the 31-day period and the Eligible Dependent is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

   If the membership application is submitted within 31 days of the date of marriage, the effective date of coverage for the Eligible Dependent will be the first of the month immediately following the date of marriage. If the membership application is not submitted within 31 days of the date of marriage and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date.

2. If, because of legal separation, divorce, annulment or death, the Subscriber's spouse is no longer eligible for coverage under this Benefit Plan, the Subscriber's spouse must apply within 31 days of legal separation, divorce, annulment or death to be eligible for continued health coverage. See Section 5.8.

   Coverage for the Subscriber's spouse under Family Coverage will cease effective the first of the month immediately following legal separation, divorce, annulment or death.

   The Subscriber's spouse must apply within 31 days of legal separation, divorce, annulment or death to be eligible for continuous health coverage under a separate benefit plan. If the Subscriber's spouse does not submit a membership application within 31 days, continuous health coverage under a separate benefit plan will not be available.

C. The Subscriber is responsible for notifying the Plan Administrator (NDPERS) and BCBSND of any change in family status within 31 days of the change.

The effective date of coverage for dependents added to this Benefit Plan within the designated time period will be the date of birth, physical placement or the first of the month immediately following the date established by court order. If a membership application is not submitted within the designated time period and the Eligible Dependent is a Late Enrollee, the effective date of coverage will be the Group's anniversary date. The following provisions will apply:

1. At the time of birth, natural children will automatically be added to the Subscriber's Benefit Plan if Family Coverage is in force. If the Subscriber is enrolled under another Class of Coverage, the Subscriber must submit a membership application for the newborn child within 31 days of the date of birth. If the membership application is not submitted within the designated time period and the child is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

2. Adopted children may be added to this Benefit Plan if a membership application, accompanied by a copy of the placement agreement or court order, is submitted to BCBSND within 31 days of physical placement of the child. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

3. Children for whom the Subscriber or the Subscriber's living, covered spouse have been appointed legal guardian may be added to this Benefit Plan by submitting a membership application within 31 days of the date legal guardianship is established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

4. Children for whom the Subscriber or the Subscriber's living, covered spouse are required by court order to provide health benefits may be added to this Benefit Plan by submitting a membership application within 31 days of the date established by court order. If the membership application is not received in accordance with this provision and the child is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

5. If any of the Subscriber's children beyond the age of 23 are medically certified as mentally retarded or physically disabled, the Subscriber may continue their coverage under Family Coverage. Coverage will remain in effect as long as the child remains disabled, unmarried and financially dependent on the Subscriber or the Subscriber's living, covered spouse. BCBSND may request annual verification of a child's disability after coverage for a disabled child has been in effect for 2 years.

   The Subscriber must provide proof of incapacity and dependency of a child's disability within 31 days after the end of the calendar year in which a child turns 23 or, if a child is beyond age 23, at the time of initial enrollment. If proof of incapacity and dependency for the dependent's disability is not made within 31 days and a lapse in coverage occurs, the child will be required to apply for coverage under a separate benefit plan. Medical qualification will be required.

6. If a child is no longer an Eligible Dependent under this Benefit Plan, the child must apply within 31 days of the loss of eligibility to be eligible for continuous health coverage under a separate benefit plan. See Section 5.8.

7. At the time of birth or adoption, Eligible Dependents may be added to this Benefit Plan if a membership application is submitted to BCBSND within 31 days of birth or physical placement of the adopted child. If the membership application is not received in accordance with this provision and the Eligible Dependent is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied.

D. Employees and/or dependents who previously declined coverage under this Benefit Plan will be able to enroll under this Benefit Plan if each of the following conditions are met:

1. During the initial enrollment period the employee or dependent states in writing that coverage under a group health plan or health insurance coverage was the reason for declining enrollment at such time.

2. The employee's or dependent's coverage under a group health plan or other health insurance coverage:

   a. was either terminated as a result of loss of eligibility (Including loss as a result of legal separation, divorce, death, termination of employment or reduction of hours, loss as a result of having a subsequent opportunity for late enrollment [including the Annual Enrollment Period] or special enrollment under the Benefit Plan but again choosing not to enroll, loss of other coverage triggered by a claim that meets or exceeds a lifetime benefit limitation or the Lifetime Maximum) or employer contributions toward such coverage were terminated; or

   b. was under COBRA and the coverage was exhausted.

3. The employee requests such enrollment within 31 days after the exhaustion or termination of coverage.

The effective date of coverage for an employee and/or dependent who previously declined coverage under this Benefit Plan and is enrolling pursuant to this provision will be the first of the month following the exhaustion or termination of the employee's and/or dependent's previous coverage. The employee and/or dependent shall be responsible for any and all premium payments from the effective date of coverage under this provision through the date the employee and/or dependent requests enrollment under the terms of this Benefit Plan.

If the membership application is not received in accordance with this provision and the employee or dependent is a Late Enrollee, the Late Enrollee's Waiting Period for Preexisting Conditions will be applied and the effective date of coverage will be the Group's anniversary date.

5.8 CONTINUATION AND CONVERSION

A. Blue Cross Blue Shield Transfers

1. Inside the BCBSND Service Area

   If the Subscriber becomes ineligible for group membership under this Benefit Plan due to an inability to meet BCBSND's requirements and enrollment regulations, coverage will be canceled at the end of the last month that premium was received from the Plan Administrator. Exceptions may be made if:

   a. The Plan Administrator cancels coverage. Conversion coverage will not be offered to a Subscriber, if on the date of conversion the Plan Administrator through which the Subscriber is eligible has terminated coverage with BCBSND and the Plan Administrator has enrolled with another insurance carrier.

   b. The Plan Administrator no longer meets BCBSND's group coverage requirements. The Subscriber will be given the right to convert to a nongroup benefit plan, subject to premiums and benefit plan provisions in effect, if application for such coverage is made within 31 days after the termination date of the previous benefit plan.

   c. Ineligibility occurs because the Subscriber elects to discontinue employment, is terminated or is otherwise no longer covered under the group health plan. The Subscriber may elect continuation coverage through the Plan Administrator in accordance with state and federal law.

   d. Ineligibility occurs because the Subscriber is no longer eligible to continue coverage under group membership as provided in Section 5.9 (A.)(1.)(c.). The Subscriber may elect conversion coverage on a nongroup basis, subject to premiums and benefit plan provisions for nongroup coverage then in effect, if the Subscriber applies for nongroup coverage within 31 days after the termination date of the previous group health plan coverage.

2. Outside the BCBSND Service Area

   If a Member moves to the service area of another Blue Cross Blue Shield Plan and BCBSND premiums are billed to the new address, membership must be transferred to the Blue Cross Blue Shield Plan serving that new address. The new Blue Cross Blue Shield Plan must at least offer the Subscriber its conversion benefit plan. Conversion benefit plans provide coverage without medical qualification. If the Member accepts the conversion benefit plan, the new Blue Cross Blue Shield Plan will credit the Member for days of continuous membership with BCBSND toward the Waiting Periods of the conversion benefit plan. Any physical or mental conditions covered by this Benefit Plan will be covered by the conversion benefit plan without a new Waiting Period if the Blue Cross Blue Shield Plan offers that feature to other members carrying the same type of coverage. The premium rate and benefits available through the conversion benefit plan of the Blue Cross Blue Shield Plan may vary significantly from those offered by BCBSND.

B. Federal Continuation (COBRA)

This provision applies under amendments to the Employee Retirement Income Security Act of 1974, 29 U.S.C. §1001, et seq. and the Public Health Service Act, 42 U.S.C. §300bb-1, et seq. These amendments are collectively referred to as "COBRA". COBRA provides for optional continuation coverage for certain Subscribers and/or Eligible Dependents under certain circumstances if the employer maintaining the group health plan normally employed 20 or more employees on a typical business day during the preceding calendar year. This provision is intended to comply with the law and any pertinent regulations and its interpretation is governed by them. This provision is not intended to provide any options or coverage beyond what is required by federal law. Subscribers should consult their Plan Administrator to find out if and how this provision applies to them and/or their Eligible Dependents.

A Subscriber covered by this Benefit Plan may have the right to choose continuation coverage if the Subscriber's group coverage is terminated because of a reduction in hours of employment or the termination of employment for reasons other than gross misconduct.

The spouse of the Subscriber covered by this Benefit Plan may have the right to choose continuation coverage if group coverage is terminated for any of the following reasons:

1. The death of the Subscriber;

2. A termination of the Subscriber's employment for reasons other than gross misconduct or a reduction in hours of employment;

3. Divorce or legal separation; or

4. The Subscriber becomes entitled to Medicare benefits.

A dependent child of the Subscriber covered by this Benefit Plan may have the right to continuation coverage if group coverage is terminated for any of the following reasons:

1. The death of the Subscriber;

2. The termination of the Subscriber's employment for reasons other than gross misconduct or reduction in a parent's hours of employment;

3. Parent's divorce or legal separation;

4. The Subscriber becomes entitled to Medicare; or

5. The dependent ceases to be an Eligible Dependent under this Benefit Plan.

A child who is born to a Subscriber or is placed for adoption with the Subscriber during the period of continuation coverage is eligible for COBRA coverage.

Continuation may apply in the event of a bankruptcy of the Group for certain retired Subscribers and their Eligible Dependents under certain conditions. If there is a bankruptcy of the Group, retired Subscribers and their Eligible Dependents should contact their Plan Administrator for more information.

The Subscriber or the Subscriber's Eligible Dependents have the responsibility to inform the Plan Administrator within 60 days of a divorce, legal separation or a child losing dependent status under this Benefit Plan. Where the Subscriber or an Eligible Dependent have been determined to be disabled under the Social Security Act, they must inform the Plan Administrator of such determination within 60 days after the date of the determination. The Subscriber or the Subscriber's Eligible Dependents are responsible for notifying the Plan Administrator within 30 days after the date of any final determination under the Social Security Act that the Subscriber or Eligible Dependent is no longer disabled.

When the Plan Administrator is notified that one of these events has occurred or has knowledge of the Subscriber's death, termination of employment, reduction in hours or Medicare entitlement, the Plan Administrator will notify the Subscriber or Eligible Dependents, as required by law of the right to choose continuation coverage. The Subscriber or Eligible Dependents has 60 days from the date coverage is lost, because of one of the events described above or 60 days from the date the Subscriber or Eligible Dependent is sent notice of his or her right to choose continuation coverage, whichever is later, to inform the Plan Administrator of the decision to continue coverage. If the Subscriber or Eligible Dependent does not choose continuation coverage, group coverage will terminate.

If the Subscriber chooses continuation coverage, the Plan Administrator is required to provide coverage identical to the coverage provided under the plan to similarly situated employees or family members. If group coverage is lost because of a termination of employment or reduction in hours, the Subscriber and Eligible Dependents may maintain continuation of coverage for 18 months. The law requires Eligible Dependents be given the opportunity to maintain continuation of coverage for 36 months in the event of the Subscriber's death, divorce, legal separation, or Medicare entitlement, or a child's loss of dependent status.

An 18-month extension of coverage is available to Eligible Dependents who elect continuation coverage if a second event occurs during the first 18 months of continuation coverage. The maximum amount of continuation coverage available when a second event occurs is 36 months. A second event includes loss of dependency status. A second event occurs only if it causes an Eligible Dependent to lose coverage under the Plan as if the first event had not occurred. Eligible Dependents must notify the Plan Administrator within 60 days after the second event occurs. If group coverage is lost because of a termination of employment or reduction in hours and the Subscriber becomes entitled to Medicare benefits less than 18 months before the termination or reduction in hours, Eligible Dependents may maintain continuation coverage for up to 36 months after the date of Medicare entitlement.

A Subscriber or Eligible Dependent determined to have been disabled for Social Security purposes at the time of termination of employment or reduction in hours or who becomes disabled at any time during the first 60 days of COBRA continuation coverage and who provides notice of such determination to the Plan Administrator, may be entitled to receive up to an additional 11 months of continuation coverage, for a total maximum of 29 months. The disability must last at least until the end of the 18-month period of continuation coverage. If the individual entitled to the disability extension has nondisabled family members who are entitled to continuation coverage, those nondisabled family members also may be entitled to extend the continuation coverage to 29 months.

There is a second 60-day election period for certain individuals who lose group health coverage and are eligible for federal trade adjustment assistance. The second election period applies only to those individuals who did not elect continuation coverage under the initial 60-day election period and who meet federal trade adjustment assistance eligibility guidelines. The second 60-day election period begins on the first day of the month in which the individual is determined to be eligible for trade adjustment assistance, but in no event may elections be made later than 6 months after the loss of group coverage. If elected, continuation coverage will be measured from the date of loss of group coverage.

Notwithstanding the availability of continuation coverage, the law also provides that continuation coverage may be terminated for any of the following reasons:

1. The Group no longer provides group coverage to any of its employees;

2. Failure to make the premium payment;

3. The person receiving continuation coverage becomes covered under another benefit plan providing the same or similar coverage (as an employee or otherwise) that does not contain any exclusion or limitation with respect to any preexisting condition of such person; (for plan years beginning on or after July 1, 1997, or later for certain plans maintained pursuant to one or more collective bargaining agreements, if the other benefit plan limits or excludes benefits for preexisting conditions but because of new rules applicable under the Health Insurance Portability and Accountability Act of 1996 those limits or exclusions would not apply to (or would be satisfied by) an individual receiving COBRA continuation coverage under this benefit plan, then this benefit plan can stop making the COBRA continuation coverage available to the individual); or

4. Entitlement to Medicare benefits.

Medical qualification is not required for a Subscriber to choose continuation of coverage. However, under the law a Subscriber may have to pay all or part of the premium for continuation coverage. The law also says that during the 180-day period ending on the expiration of the 18, 29 or 36-month continuation period, a Subscriber or Eligible Dependent who has chosen continuation coverage may be provided with the option of enrollment under a conversion health plan otherwise generally available under this Benefit Plan. A membership application must be submitted within 31 days to be eligible for conversion coverage. If a membership application is not submitted within the 31-day period, medical qualification will be required.

Conversion Privileges

When the 18 or 36-month continuation period has ended, the Subscriber will be given the opportunity of enrolling under a conversion health plan.

If ineligibility occurs because of a failure to make timely payment for health care coverage, the Subscriber will be given the opportunity of enrolling under a conversion health plan if application is made within 60 days of ineligibility.

Contact BCBSND's NDPERS Service Unit at 1-800-223-1704 with any questions or for further information on conversion privileges.

5.9 CANCELLATION OF THIS OR PREVIOUS BENEFIT PLANS

If the Benefit Plan is terminated, modified or amended, coverage is automatically terminated, modified or amended for all enrolled Members of the group health plan. It is the Plan Administrator's responsibility to notify Members of the termination of coverage.

5.10 NOTICE TO MOTHERS AND NEWBORNS

BCBSND generally may not, under state law (Section 26.1-36-09.8, N.D.C.C.), restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, state law generally does not prohibit the mother's or newborn's attending Health Care Provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, BCBSND may not, under state law, require that a Health Care Provider obtain authorization from BCBSND for prescribing a length of stay not in excess of 48 hours (or 96 hours).

5.11 MEMBER - PROVIDER RELATIONSHIP

Benefits are available only for Medically Appropriate and Necessary services while under the care and treatment of a Health Care Provider. Nothing herein contained shall interfere with the professional relationship between the Member and his or her Health Care Provider.

If the Member remains in an institution after advice is received from the attending Physician that further hospitalization is unnecessary, the Subscriber shall be solely responsible to the institution for all charges incurred after he or she has been so advised. Further, BCBSND may at any time request the attending Physician to certify the necessity of further confinement. If the attending Physician does not certify that further confinement is necessary, the Member is not entitled to further benefits during the confinement.

Each Member is free to select a Health Care Provider and discharge such Health Care Provider. Health Care Providers are free to provide medical care according to his or her own judgment. Nothing contained in this Benefit Plan will interfere with the ordinary relationship that exists between a Health Care Provider and patient or obligate BCBSND in any circumstances to supply a Health Care Provider for any Member. The provision of medical care and/or the decision not to provide medical care may have a financial impact on the Health Care Provider. The Member should consult with his/her Health Care Provider regarding the nature and extent of such a financial impact, if any, as well as how it might affect medical care decisions.

A Member's medical care is between the Member and the Member's Health Care Provider, and this Benefit Plan only explains what is or is not covered, not what medical care the Member should seek.

Costs relating to any services subject to the managed benefits provisions that are not approved by BCBSND will not be covered. **The ultimate decision on the Member's medical care must be made by the Member and the Member's Health Care Provider. BCBSND only has the authority to determine the extent of benefits available for Covered Services under this Benefit Plan.**

The Member agrees to conform to the rules and regulations of the Hospital in which he or she is a patient, including those rules governing Admissions and types and scope of services furnished by said Hospital.

5.12 BCBSND'S RIGHT TO RECOVERY OF PAYMENT

All Members expressly consent and agree to reimburse BCBSND for benefits provided or paid for which a Member was not eligible under the terms of this Benefit Plan. Such reimbursement shall be due and payable immediately upon notification and demand by BCBSND. Further, at the option of BCBSND, benefits or the Allowance therefore may be diminished or reduced as an off set toward such reimbursement. Acceptance of membership fees, or providing or paying benefits by BCBSND, shall not constitute a waiver of their rights to enforce these provisions in the future.

5.13 CONFIDENTIALITY

All Protected Health Information (PHI) maintained by BCBSND under this Benefit Plan is confidential. Any PHI about a Member under this Benefit Plan obtained by BCBSND from that Member or from a Health Care Provider may not be disclosed to any person except:

A. Upon a written, dated, and signed authorization by the Member or prospective Member or by a person authorized to provide consent for a minor or an incapacitated person;

B. If PHI identifies the Health Care Provider, upon a written, dated, and signed approval by the Health Care Provider. However, BCBSND may disclose PHI to the Health Care Data Committee for the enhancement of price competition in the health care market. BCBSND may also disclose to a Health Care Provider, as part of a contract or agreement in which the Health Care Provider is a party, data or information that identifies a Health Care Provider as part of mutually agreed upon terms and conditions of the contract or agreement;

C. If the data or information does not identify either the Member or prospective Member or the Health Care Provider, the data or information may be disclosed upon request for use for statistical purposes or research;

D. Pursuant to statute or court order for the production or discovery of evidence; or

E. In the event of a claim or litigation between the Member or prospective Member and BCBSND in which the PHI is pertinent.

This section may not be construed to prevent disclosure necessary for BCBSND to conduct health care operations, Including utilization review or management consistent with state law, to facilitate payment of a claim, to analyze health plan claims or health care records data, to conduct disease management programs with Health Care Providers, or to reconcile or verify claims under a shared risk or capitation arrangement. This section does not apply to PHI disclosed by BCBSND as part of a research project approved by an institutional review board established under federal law. This section does not apply to PHI disclosed by BCBSND to the insurance commissioner for access to records of BCBSND for purposes of enforcement or other activities related to compliance with state or federal laws.

5.14 PRIVACY OF PROTECTED HEALTH INFORMATION

BCBSND will not disclose the Member's Protected Health Information (PHI) to the Group unless the Group certifies that the Benefit Plan has been amended to incorporate the privacy restrictions required under federal and state law, and agrees to abide by them.

BCBSND will disclose the Member's PHI to the Group to carry out administrative functions under the terms of the Benefit Plan, but only in accordance with applicable federal and state law. Any disclosure to and use by the Group of the Member's PHI will be subject to and consistent with this section. BCBSND will not disclose the Member's PHI to the Group unless such disclosures are included in a notice of privacy practices distributed to the Member. BCBSND will not disclose the Member's PHI to the Group for actions or decisions related to the Member's employment or in connection with any other benefits made available to the Member.

The following restricts the Group's use and disclosure of the Member's PHI:

A. The Group will neither use nor further disclose the Member's PHI except as permitted by the Benefit Plan or required by law.

B. The Group will ensure that anyone who receives the Member's PHI agrees to the restrictions and conditions of the Benefit Plan with respect to the Member's PHI.

C. The Group will not use or disclose the Member's PHI for actions or decisions related to the Member's employment or in connection with any other benefit made available to the Member.

D. The Group will promptly report to the Plan Administrator any use or disclosure of the Member's PHI that is inconsistent with the uses and disclosures allowed under this section upon learning of such inconsistent use or disclosure.

E. In accordance with federal law, the Group will make PHI available to the Member who is the subject of the information. Such information is subject to amendment and, upon proper notice, the Group will amend the Member's PHI where appropriate.

F. The Group will document disclosures it makes of the Member's PHI so the Plan Administrator is able to provide an accounting of disclosures as required under applicable state and federal law.

G. The Group will make its internal practices, books, and records relating to its use and disclosure of the Member's PHI available to the Plan Administrator and to the U.S. Department of Health and Human Services as necessary to determine compliance with federal law.

H. The Group will, where feasible, return or destroy all Members PHI in whatever form or medium received from the Plan Administrator, including all copies of and any data or compilations derived from and allowing identification of any Member when the Member's PHI is no longer needed for the plan administration functions for which the disclosure was made. If it is not feasible to return or destroy all Member PHI, the Group will limit the use or disclosure of any Member PHI to those purposes that make the return or destruction of the information infeasible.

5.15 NOTICE OF PRIVACY PRACTICES

BCBSND maintains a Notice of Privacy Practices. This Notice of Privacy Practices outlines BCBSND's uses and disclosures of PHI, sets forth BCBSND's legal duties with respect to PHI and describes a Member's rights with respect to PHI. Members can obtain a Notice of Privacy Practices by contacting Member Services at the telephone number and address on the back of the Identification Card or by visiting the BCBSND website.

5.16 SECURITY MEASURES FOR ELECTRONIC PROTECTED HEALTH INFORMATION

A. The Group will implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Members' electronic PHI that the Group creates, receives, maintains, or transmits on the Plan Administrator's behalf.

B. The Group will report to the Plan Administrator any attempted or successful (1) unauthorized access, use, disclosure, modification, or destruction of Members' electronic PHI or (2) interference with the Group's system operations in the Group's information systems, of which the Group becomes aware, except any such security incident that results in disclosure of Members' PHI not permitted by the Benefit Plan must be reported to the Plan Administrator as required by 5.17 (D).

C. The Group will support the adequate separation between the Group and the Plan Administrator, as specified in the Benefit Plan, with reasonable and appropriate security measures.

5.17 RETROSPECTIVE DISCOUNT PAYMENT DISCLOSURE

A Member may be required to pay Cost Sharing Amounts for each Prescription Medication or Drug provided under the terms of this Benefit Plan. A Member will pay these Cost Sharing Amounts directly to the Health Care Provider at the time the Prescription Medication or Drug is dispensed or administered.

In some cases, drug manufacturers may offer retrospective discount payments on certain specific Prescription Medications and Drugs dispensed or administered to Members under the terms of this Benefit Plan. Such retrospective discount payments from the manufacturer are not determined or paid by the manufacturer until at least one year following the date a Prescription Medication or Drug was provided to a Member under the terms of this Benefit Plan. A portion of these retrospective discount payments, if offered, is retained by an entity that performs pharmaceutical manufacturer discount program services through a contract with BCBSND on behalf of this Benefit Plan. Another portion of these retrospective discount payments, if offered, is paid to BCBSND. In its sole discretion, and only in the case where a Member is required to pay Coinsurance as part of the Cost Sharing Amounts for each Prescription Medication and Drug provided under the terms of this Benefit Plan, BCBSND may periodically refund to Members a proportional amount of any retrospective discount payments received. The calculation and payment of any such proportional refund rests in the sole discretion of BCBSND. The manner in which such retrospective discount program payment refund, if any, is distributed to a Member rests in the sole discretion of BCBSND. The Member waives any right, title, or interest in and to such proportional retrospective discount payment once the Member is no longer eligible for benefits under the terms of this Benefit Plan, and BCBSND may use its discretion and disburse any such retrospective discount payments as it deems appropriate and necessary in its administration of this Benefit Plan. The Member shall pay all Cost Sharing Amounts at the time the Prescription Medication or Drug is provided, without regard to any potential retrospective discount.

Pharmaceutical manufacturer discount program services Include the following: processing and handling of pharmaceutical manufacturer retrospective discounts for applicable claims; billing and collecting appropriate retrospective discounts on those claims from manufacturers; distributing payments in accordance with the terms of manufacturer discount program service agreements; formulary development, use and communication; benefit design analysis and consultation; annual analysis of claims data and recommendations; monthly utilization reporting; formulary appeals; and clinical services including physician and disease-state education programs.

5.18 CERTIFICATE OF CREDITABLE COVERAGE

A Member covered under this Benefit Plan may obtain a Certificate of Creditable Coverage by contacting BCBSND at the telephone number and address on the back of the Identification Card. A Certificate of Creditable Coverage will be provided to the Member within 31 days of this request.

When coverage under this Benefit Plan is terminated, BCBSND will, within 31 days, issue a Certificate of Creditable Coverage to the Subscriber. Upon notification by the Subscriber of the ineligibility of a dependent, a Certificate of Creditable Coverage will be issued to the affected Member within 31 days.

SECTION 6
CLAIMS FOR BENEFITS AND APPEALS

A Member may submit a Claim for Benefits by contacting BCBSND at the telephone number or address listed on the back of the Identification Card. The Member is responsible for providing BCBSND with a Claim for Benefits within 18 months after the date the benefits or services offered under this Benefit Plan were incurred. A Claim for Benefits must include the information necessary for BCBSND to determine benefits or services.

The Member may designate an Authorized Representative to pursue a Claim for Benefits or appeal an adverse determination from a Claim for Benefits. The designation of an Authorized Representative is limited in scope and not an assignment of benefits. It does not grant the Authorized Representative any of the Member's rights and privileges under the terms of this Benefit Plan. See Section 3, Managed Benefits.

Upon receipt of a Claim for Benefits under this Benefit Plan from a Member and/or the Member's Authorized Representative, the following claims review and appeals process applies:

Maximum Time Limits for Claims Processing

Type of Notice	Emergency Claim for Benefits	Pre-Service Claim for Benefits	Post-Service Claim for Benefits	Ongoing Course of Treatment Claim for Benefits
Initial Determinations (Plan) Extensions	72 Hours NONE	15 Days 15 Days	30 Days 15 Days	Notification “sufficiently in advance” of reduction or termination of benefits.*
Improperly Filed Claims (Plan)	24 Hours	5 Days	NONE	N/A
Additional Information Request (Plan)	24 Hours	15 Days	30 Days	N/A
Request for Appeal (Claimant)	180 Days	180 Days	180 Days	N/A
Appeal Determinations (Plan) Extensions	72 Hours NONE	30 Days NONE	60 Days NONE	As appropriate to the type of claim.

*If claim is made at least 24 hours before expiration of treatment and the claim involves an urgent care claim, BCBSND's decision must be made within 24 hours of receipt of the claim.

6.1 CLAIMS FOR BENEFITS INVOLVING PREAUTHORIZATION AND PRIOR APPROVAL (PRESERVICE CLAIMS FOR BENEFITS)

A. Claims for Benefits Requiring Preauthorization or Prior Approval.

1. Claims for Benefits Requiring Preauthorization or Prior Approval. Upon receipt of a Claim for Benefits under the Benefit Plan from a Member and/or a Member's Authorized Representative that is conditioned on a Member obtaining approval in advance of obtaining the benefit or service, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 15 days from receiving the claim. BCBSND may extend this initial time period an additional 15 days if BCBSND is unable to make a determination due to circumstances beyond its control after giving the Member and/or the Member's Authorized Representative notice of the need for additional time prior to the expiration of the initial 15-day time period.

If the Member and/or the Member's Authorized Representative improperly submits a Claim for Benefits, BCBSND will notify the Member and/or the Member's Authorized Representative as soon as possible but no later than 5 days after receipt of the Claim for Benefits and provide the Member and/or the Member's Authorized Representative with the proper procedures to be followed when filing a Claim for Benefits. BCBSND may also request additional or specified information after receiving a Claim for Benefits, but any such request will be made prior to the expiration of the initial 15-day time period after receiving the Claim for Benefits. Upon receiving notice of an improperly filed Claim for Benefits or a request for additional or specified information, the Member and/or the Member's Authorized Representative has 45 days in which to properly file the Claim for Benefits and submit the requested information. After receiving the properly filed Claim for Benefits or additional or specified information, BCBSND shall notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 15 days after receipt of the properly filed Claim for Benefits and additional information.

2. Claims for Benefits Involving an Ongoing Course of Treatment or Number of Treatments. For services or benefits involving an ongoing course of treatment taking place over a period of time or number of treatments, BCBSND will provide the Member and/or the Member's Authorized Representative with notice that the services or benefits are being reduced or terminated at a time sufficiently in advance to permit the Member and/or the Member's Authorized Representative to request extending the course of treatment or number of treatments. Upon receiving a Claim for Benefits from a Member and/or a Member's Authorized Representative to extend such treatment, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination as soon as possible prior to terminating or reducing the benefits or services.

3. Appeals of Claims for Benefits Requiring Preauthorization and Prior Approval. The Member and/or the Member's Authorized Representative have up to 180 days to appeal BCBSND's benefit determination of a Claim for Benefits requiring Preauthorization or Prior Approval benefits or services. Upon receipt of an appeal from a Member and/or a Member's Authorized Representative, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 30 days after receiving the Member's and/or the Member's Authorized Representative's request for review.

B. Claims for Benefits Involving Emergency Care or Treatment

1. Claims for Benefits for Emergency Services. Upon receipt of a Claim for Benefits for Emergency Services from a Member and/or a Member's Authorized Representative, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination as soon as possible but no later than 72 hours after receiving the Claim for Benefits.

   If the Member and/or the Member's Authorized Representative improperly submits a Claim for Benefits or the Claim for Benefits is incomplete and BCBSND requests additional or specified information, BCBSND will notify the Member and/or the Member's Authorized Representative as soon as possible but no later than 24 hours after receipt of the Claim for Benefits. Upon receiving notice of an improperly filed Claim for Benefits or the request from BCBSND for additional or specified information, the Member and/or the Member's Authorized Representative has 48 hours to properly file the Claim for Benefits or to provide the requested information. After receiving the properly filed Claim for Benefits or requested information, BCBSND shall notify the Member and/or the Member's Authorized Representative of its determination as soon as possible but no later than 48 hours after receipt of the additional or specified information requested by BCBSND or within 48 hours after expiration of the Member's time period to respond.

2. Appeals of Claims for Benefits for Emergency Services. The Member and/or the Member's Authorized Representative have up to 180 days to appeal BCBSND's benefit determination of a Claim for Benefits for Emergency Services. Upon receipt of an appeal from a Member and/or a Member's Authorized Representative, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination, whether adverse or not, as soon as possible but no later than 72 hours after receiving the Member's and/or the Member's Authorized Representative's request for review. A Member and/or a Member's Authorized Representative may request an appeal from a determination involving a Claim for Benefits for Emergency Services orally or in writing, and BCBSND will accept needed materials by telephone or facsimile.

6.2 ALL OTHER CLAIMS FOR BENEFITS (POST SERVICE CLAIM FOR BENEFITS)

A. Claims for Benefits for All Other Services or Benefits. Upon receipt of a Claim for Benefits under the Benefit Plan from a Member and/or a Member's Authorized Representative, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 30 days from receiving the Claim for Benefits and only if the determination is adverse to the Member. BCBSND may extend this initial time period in reviewing a Claim for Benefits an additional 15 days if BCBSND is unable to make a determination due to circumstances beyond its control after giving the Member and/or the Member's Authorized Representative notice of the need for additional time prior to the expiration of the initial 30-day time period.

   BCBSND may request additional or specified information after receiving a Claim for Benefits, but any such request will be made prior to the expiration of the initial 30-day time period after receiving the Claim for Benefits. Upon receiving a request for additional or specified information, the Member and/or the Member's Authorized Representative has 14 days in which to submit the requested information. After receiving the additional or specified information, BCBSND shall notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 30 days after receipt of the additional information.

B. Claims for Benefits Involving an Ongoing Course of Treatment or Number of Treatments. For a Claim for Benefits involving services or benefits involving an ongoing course of treatment taking place over a period of time or number of treatments, BCBSND will provide the Member and/or the Member's Authorized Representative with notice that the services or benefits are being reduced or terminated at a time sufficiently in advance to permit the Member and/or the Member's Authorized Representative to request extending the course of treatment or number of treatments. Upon receiving a Claim for Benefits from a Member and/or a Member's Authorized Representative to extend such treatment, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination as soon as possible prior to terminating or reducing the benefits or services.

C. Appeals from Initial Claims for Benefits Determinations for All Other Claims for Services or Benefits. The Member and/or the Member's Authorized Representative have up to 180 days to appeal BCBSND's benefit determination of a Claim for Benefits. Upon receipt of an appeal from a Member and/or a Member's Authorized Representative, BCBSND will notify the Member and/or the Member's Authorized Representative of its determination within a reasonable period of time but no later than 60 days after receiving the Member's and/or the Member's Authorized Representative's request for review.

To inquire on the Claims for Benefits and appeals process, please contact Member Services at the telephone number and address on the back of the Identification Card.

SECTION 7
OTHER PARTY LIABILITY

This section describes BCBSND's Other Party Liability programs and coordinating benefits and services when a Member has other health care coverage available, and outlines the Member's responsibilities under these programs. BCBSND shall determine the interpretation and application of the following Other Party Liability provisions in each and every situation.

7.1 COORDINATION OF BENEFITS

This provision applies when a Member is enrolled under another plan (defined below), whether insured or self-funded, with a similar coordination of benefits provision. If the sum of benefits payable under this Benefit Plan and the other plan exceed the total allowable expense for Covered Services, the benefits payable under this Benefit Plan will be reduced so the sum of benefits payable under all plans does not exceed 100% of the total allowable expense for Covered Services.

For the purposes of this coordination of benefits provision, the following definitions apply:

"Allowable expense" means a health care expense, including deductibles, coinsurance and copayments (if required as part of a plan), that is covered at least in part by any plan covering a Member. When a plan provides benefits in the form of services, the reasonable cash value of each service will be considered an allowable expense and a benefit paid. An expense not covered by any plan covering a Member is not an allowable expense. In addition, any expense that a health care provider by law or in accordance with a contractual agreement is prohibited from charging a Member is not an allowable expense. The following are examples of expenses that are not allowable expenses:

(1) The difference between the cost of a semiprivate hospital room and a private hospital room is not an allowable expense, unless one of the plans provides coverage for private hospital room expenses.

(2) If a Member is covered by two or more plans that compute their benefit payments on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology, any amount in excess of the highest reimbursement amount for a specific benefit is not an allowable expense.

(3) If a Member is covered by two or more plans that provide benefits or services on the basis of negotiated fees, an amount in excess of the highest of the negotiated fees is not an allowable expense.

(4) If a Member is covered by one plan that calculates its benefits or services on the basis of usual and customary fees or relative value schedule reimbursement methodology or other similar reimbursement methodology and another plan that provides its benefits or services on the basis of negotiated fees, the primary plan's payment arrangement shall be the allowable expense for all plans. However, if the provider has contracted with the secondary plan to provide the benefit or service for a specific negotiated fee or payment amount that is different from the primary plan's payment arrangement and if the provider's contract permits, the negotiated fee or payment shall be the allowable expense used by the secondary plan to determine its benefits.

(5) The amount of any benefit reduction by the primary plan because a Member has failed to comply with the plan provisions is not an allowable expense. Examples of these types of plan provisions include second surgical opinions, precertification of admissions, and preferred provider arrangements.

"Closed panel plan" means a plan that provides health care benefits to Members primarily in the form of services through a panel of health care providers that have contracted with or are employed by the plan, and that excludes coverage for services provided by other health care providers, except in cases of emergency or referral by a panel member.

"Custodial parent" means the parent awarded physical custody by a court order or, in the absence of a court order, the parent with whom the child resides more than one-half of the calendar year excluding any temporary visitation.

"Plan" includes any of the following that provides benefits or services for medical or dental care or treatment: group and nongroup insurance contracts, health maintenance organization contracts, closed panel plans or other forms of group or group-type coverage; medical care components of long-term care contracts, such as skilled nursing care; medical benefits under group or individual automobile contracts; and Medicare or any other federal government plan, as permitted by law. A "plan" does not include any of the following: hospital indemnity coverage or other fixed indemnity coverage; accident-only coverage; specified disease or specified accident coverage; limited benefit health coverage, as defined by state law; school accident-type coverage; benefits for nonmedical components of long-term care policies; Medicare supplement policies; Medicaid policies; or coverage under other federal governmental plans, unless permitted by law.

A. Order of Benefits Determination Rules. The order of benefits determination rules govern the order in which this Benefit Plan and another plan will pay benefits. The plan that pays first is called the primary plan. The primary plan must pay benefits in accordance with its policy terms without regard to the possibility that another plan may cover some expenses. The secondary plan may reduce the benefits it pays so that the benefits payable under all plans do not total more than 100% of the total allowable expense for Covered Services.

   A plan that does not contain a coordination of benefits provision that is consistent with this Benefit Plan's provision is always primary unless the rules of both plans state that this Benefit Plan is primary. An exception exists for coverage that is obtained by virtue of membership in a group that is designed to supplement part of a basic package of benefits and provides that the supplementary coverage shall be excess to any other parts of the plan provided by the policyholder. Examples of these types of situations are major medical coverages that are superimposed over base plan hospital and surgical benefits, and insurance type coverages that are written in connection with a closed panel plan to provide out-of-network benefits.

   If a Claim for Benefits or any other request for reimbursement is submitted under this Benefit Plan the order of payment will be the first of the following rules that apply:

   1. Nondependent or dependent. The plan that covers the person other than as a dependent, for example as an employee, member, subscriber, policyholder or retiree, is the primary plan and the plan that covers the person as a dependent is the secondary plan.

      However, if the person is a Medicare beneficiary, and, as a result of the provisions of Title XVIII of the Social Security Act and implementing regulations, Medicare is:

      a. Secondary to the plan covering the person as a dependent; and

      b. Primary to the plan covering the person as other than a dependent (e.g., a retired employee).

      Then the order of benefits is reversed so that the plan covering the person as an employee, member, subscriber, policyholder or retiree is the secondary plan and the other plan covering the person as a dependent is the primary plan.

2. Dependent child covered under more than one plan. Unless there is a court order stating otherwise, plans covering a dependent child shall determine the order of benefits as follows:

   a. For a dependent child whose parents are married or are living together, whether or not they have ever been married:

      (1) The plan of the parent whose birthday falls earlier in the calendar year is the primary plan; or

      (2) If both parents have the same birthday, the plan that has covered the parent longest is the primary plan.

   b. For a dependent child whose parents are divorced or separated or are not living together, whether or not they have ever been married:

      (1) If a court order states that one of the parents is responsible for the dependent child's health care expenses or health care coverage and the plan of that parent has actual knowledge of those terms, that plan is primary. If the parent with responsibility has no health care coverage for the dependent child's health care expenses, but that parent's spouse does, that parent's spouse's plan is the primary plan. This paragraph shall not apply with respect to any plan year during which Covered Services are paid or provided before the entity has actual knowledge of the court order provision. A copy of the court order must be provided to BCBSND upon request;

      (2) If a court order states that both parents are responsible for the dependent child's health care expenses or health care coverage, the provisions of Section 7.1(A.)(2.)(a.) shall determine the order of benefits;

      (3) If a court order states that the parents have joint custody without specifying that one parent has responsibility for the health care expenses or health care coverage of the dependent child, the provisions of Section 7.1(A.)(2.)(a.) shall determine the order of benefits; or

      (4) If there is no court order allocating responsibility for the child's health care expenses or health care coverage, the order of benefits for the child are as follows:

         a. The plan covering the custodial parent;

         b. The plan covering the custodial parent's spouse;

         c. The plan covering the non-custodial parent; and then

         d. The plan covering the non-custodial parent's spouse.

   c. For a dependent child covered under more than one plan of individuals who are not the parents of the child, the order of benefits shall be determined, as applicable, under Section 7.1(A.)(2.)(a.) or Section 7.1(A.)(2.)(b.) as if those individuals were parents of the child.

3. Active employee or retired or laid-off employee. The plan that covers a person as an active employee that is, an employee who is neither laid off nor retired, or as a dependent of an active employee is the primary plan. The plan covering that same person as a retired or laid-off employee or as a dependent of a retired or laid-off employee is the secondary plan.

   If the other plan does not have this rule, and as a result, the plans do not agree on the order of benefits, this rule is ignored. Also, this rule does not apply if the rule in Section 7.1(A.)(1.) can determine the order of benefits.

4. COBRA or state continuation coverage. If a person whose coverage is provided pursuant to COBRA or under a right of continuation pursuant to state or other federal law is covered under another plan, the plan covering the person as an employee, member, subscriber, policyholder or retiree or covering the person as a dependent of an employee, member, subscriber, policyholder or retiree is the primary plan and the plan covering that same person pursuant to COBRA or under a right of continuation pursuant to state or other federal law is the secondary plan.

   If the other plan does not have this rule, and if, as a result, the plans do not agree on the order of benefits, this rule is ignored. Also, this rule does not apply if the rule in Section 7.1(A.)(1.) can determine the order of benefits.

5. Longer or shorter length of coverage. If the preceding rules do not determine the order of benefits, the plan that covered the person for the longer period of time is the primary plan and the plan that covered the person for the shorter period of time is the secondary plan.

   To determine the length of time a person has been covered under a plan, two successive plans shall be treated as one if the covered person was eligible under the second plan within 24 hours after coverage under the first plan ended.

   The start of a new plan does not include:

   a. A change in the amount or scope of a plan's benefits;

   b. A change in the entity that pays, provides or administers the plan's benefits; or

   c. A change from one type of plan to another, such as from a single employer plan to a multiple employer plan.

   The person's length of time covered under a plan is measured from the person's first date of coverage under that plan. If that date is not readily available for a group plan, the date the person first became a member of the group must be used as the date from which to determine the length of time the person's coverage under the present plan has been in force.

6. If none of the preceding rules determines the order of benefits, the allowable expenses shall be shared equally between the plans.

B. If it is determined this Benefit Plan is secondary, the benefits of this Benefit Plan will be reduced so that the total benefits paid or provided by all plans during a Benefit Period are not more than the total allowable expenses. In determining the amount to be paid for any claim, this Benefit Plan will calculate the benefits it would have paid in the absence of coverage under another plan and apply that calculated amount to the allowable expense under this Benefit Plan that is unpaid by the primary plan. The benefits of this Benefit Plan will then be reduced so that they and the benefits payable under the other plans for the claim do not total more than 100% of the total allowable expense for that claim. When the benefits of this Benefit Plan are reduced as described in this subsection, each benefit is reduced in proportion. It is then charged against any applicable benefit limit of this Benefit Plan. In addition, if this Benefit Plan has a deductible and/or coinsurance, the deductible and/or coinsurance will be credited with any amounts that would have been credited in the absence of the other plan.

The ultimate responsibility of BCBSND for payment of Covered Services will never exceed the amount payable in the absence of other coverage.

RIGHT TO RECEIVE AND RELEASE NEEDED INFORMATION

Certain facts about health care coverage and services are needed to administer this coordination of benefits provision and to determine benefits payable under this Benefit Plan and other plans. BCBSND may obtain the facts it needs from or give them to other organizations or persons for the purpose of administering this provision. BCBSND need not tell, or obtain the consent of, any person to do this. Each Member claiming benefits under this Benefit Plan must provide BCBSND with any facts it needs to administer this provision and determine benefits payable.

FACILITY OF PAYMENT

A payment made under another plan may include an amount that should have been paid under this Benefit Plan. If it does, BCBSND may pay that amount to the organization that made the payment. The amount will then be treated as though it were a benefit paid under this Benefit Plan. BCBSND will not have to pay that amount again.

RIGHT OF RECOVERY

If payments have been made by BCBSND for Covered Services in excess of the amount payable under this Benefit Plan, BCBSND may recover the excess from any persons to or for whom such payments were made, including any Member, provider or other organization. The Member agrees to execute and deliver any documentation requested by BCBSND to recover excess payments.

This provision is administered in accordance with the Coordination of Benefits Regulation adopted by the North Dakota Insurance Commissioner.

7.2 AUTOMOBILE NO-FAULT OR MEDICAL PAYMENT BENEFIT COORDINATION

If a Member is eligible for basic automobile no-fault benefits or other automobile medical payment benefits as the result of accidental bodily injury arising out of the operation, maintenance or use of a motor vehicle, the benefits available under this Benefit Plan will be reduced by and coordinated with the basic automobile no-fault benefits or other automobile medical payment benefits.

7.3 MEDICAL PAYMENT BENEFIT COORDINATION

If a Member is eligible for medical payment benefits provided by any other collectible insurance as a result of an injury, the benefits available under this Benefit Plan will be reduced by and coordinated with the medical payment benefits provided by any other collectible insurance not prohibited from coordination of benefits.

7.4 RIGHTS OF SUBROGATION, REIMBURSEMENT AND ASSIGNMENT

If BCBSND pays benefits for Covered Services to or for a Member for any injury or condition caused or contributed to by the act or omission of any third party, BCBSND shall have certain rights of assignment, subrogation and/or reimbursement as set forth below. BCBSND has full discretionary authority to determine whether to exercise any or all of said rights.

A Member must notify BCBSND of the circumstances of the injury or condition, cooperate with BCBSND in doing whatever is necessary to enable BCBSND to assert these rights, and do nothing to prejudice them. The rights stated herein apply automatically in any applicable situation. BCBSND has no obligation to notify a Member of BCBSND's intent to exercise one or more of these rights and BCBSND's failure to provide such a notice shall not constitute a waiver of these rights.

If a Member does not comply with these provisions or otherwise prejudices the rights of BCBSND to assignment, subrogation or reimbursement, BCBSND shall have full discretion to withhold payment of any future benefits to or for the Member and to off set the benefits already paid to or for the Member against the payment of any future benefits to or for the Member regardless of whether or not said future benefits are related to the injury or condition.

A. Right of Assignment and/or Subrogation: If a Member fails to bring a claim against a third party (including any person, firm or corporation which may be liable for or on behalf of the third party), BCBSND has the right to bring said claim as the assignee and/or subrogee of the Member and to recover any benefits paid under this Benefit Plan.

B. Right of Reimbursement: If a Member makes any recovery from a third party (including any person, firm or corporation which may be liable for or on behalf of the third party), whether by judgment, settlement or otherwise, the Member must notify BCBSND of said recovery and must reimburse BCBSND to the full extent of any benefits paid by BCBSND, not to exceed the amount of the recovery. This right of reimbursement shall apply to any such recovery to the extent of any benefits paid under this Benefit Plan even if the Member has not received full compensation for the injury or condition. Any recovery the Member may obtain is conclusively presumed to be for the reimbursement of benefits paid by BCBSND until BCBSND has been fully reimbursed.

The Member agrees to not transfer any right to any recovery to a third party or otherwise attempt to avoid BCBSND's rights under this Benefit Plan. The Member agrees that any recovery shall be held in trust for BCBSND until BCBSND has been fully reimbursed and/or that BCBSND shall have a lien on any recovery to the full extent of any benefits paid under this Benefit Plan. The Member agrees that to enforce its rights under this section, BCBSND may pursue any and all remedies, legal or equitable, available under state or federal law, Including subrogation, breach of contract, constructive trust, equitable lien, injunction, restitution and any other remedies.

7.5 WORKERS' COMPENSATION

If benefits or compensation are available, in whole or in part, under provisions of a state workers' compensation act, laws of the United States or any state or political subdivision thereof, the benefits under this Benefit Plan will be reduced by and coordinated with such other benefits or compensation available to a Member.

If a Member is injured or suffers any condition caused or contributed to by the Member's employment, the Member must notify BCBSND of the circumstances of the injury and condition, cooperate with BCBSND and the United States or any state or political subdivision thereof in doing whatever is necessary to determine the availability of such benefits or compensation, and do nothing to prejudice them.

In the event of the failure of a Member to comply with this provision or if a Member prejudices that Member's right or entitlement to benefits or compensation available under such a program, BCBSND shall have full discretion to withhold payment of any future benefits to or for the Member and to off set the benefits already paid to or for the Member against the payment of any future benefits to or for the Member regardless of whether or not said future benefits are related to the injury or condition.

SECTION 8
DEFINITIONS

This section defines the terms used in this Benefit Plan. These terms will be capitalized throughout this Benefit Plan when referred to in the context defined. BCBSND shall determine the interpretation and application of the Definitions in each and every situation.

8.1 **ADMISSION** - entry into a facility as an Inpatient or Outpatient for treatment and care when ordered by a Health Care Provider with admitting privileges. An Admission ends when a Member is discharged or released from the facility and is no longer registered as a patient.

8.2 **ALLOWANCE OR ALLOWED CHARGE** - the maximum dollar amount that payment for a procedure or service is based on as determined by BCBSND.

8.3 **AMBULATORY BEHAVIORAL HEALTH CARE** - the continuum of services provided for substance abuse and psychiatric illness less intensive than inpatient and more intensive than outpatient treatment. This continuum includes those services referred to as Partial Hospitalization or intensive outpatient treatment as long as the treatment meets or exceeds the minimum required for Partial Hospitalization.

8.4 **AMBULATORY (OUTPATIENT) SURGERY** - surgery performed in the outpatient department of a Hospital, Ambulatory Surgical Facility or Professional Health Care Provider's office.

8.5 **ANCILLARY SERVICES** - services required for the treatment of a Member in a Hospital, other than room, board and professional services.

8.6 **ANNUAL ENROLLMENT PERIOD** - a period of time an eligible employee or Eligible Dependent may apply for coverage under this Benefit Plan as a Late Enrollee. The Annual Enrollment Period will be a period of 31 days prior to the Group's anniversary date.

8.7 **AUTHORIZED REPRESENTATIVE** - a Health Care Provider or other individual authorized by the Member to inquire or request information on a Member.

8.8 **BASIC PLAN** - the Member elects to access the health care system through a Health Care Provider that is not a part of the Preferred Provider Organization. Benefit payment will be at the Basic Plan level.

8.9 **BCBSND** - Blue Cross Blue Shield of North Dakota, a legal trade name of Noridian Mutual Insurance Company.

8.10 **BENEFIT PERIOD** - a specified period of time when benefits are available for Covered Services under this Benefit Plan. A Claim for Benefits will be considered for payment only if the date of service or supply was within the Benefit Period. All benefits are determined on a calendar year (January 1 through December 31) Benefit Period.

8.11 **BENEFIT PLAN** - the agreement with BCBSND, Including the Subscriber's membership application, Identification Card, the Benefit Plan Agreement, this Certificate of Insurance, the Benefit Plan Attachment and any supplements, endorsements, attachments, addenda or amendments.

8.12 **BENEFIT PLAN ATTACHMENT** - the statement accompanying the Identification Card that identifies current Benefit Plan information.

8.13 **BENEFIT PLAN NUMBER** - a number assigned by BCBSND and listed on the Identification Card that identifies the Subscriber for administrative purposes.

8.14 **BLUECARD PROGRAM** - The Blue Cross and Blue Shield Association, of which BCBSND is an independent licensee, has implemented the BlueCard Program. This allows Members seeking medical services outside BCBSND's (Home Plan) service area, access to the Health Care Provider discounts of the local Blue Cross and/or Blue Shield entity (Host Plan) participating in the BlueCard Program.

8.15 **CLAIM FOR BENEFITS** - a request for a benefit or benefits under the terms of this Benefit Plan made by a Member in accordance with BCBSND's reasonable procedures for filing a Claim for Benefits as outlined in Section 6, Claims for Benefits and Appeals. A Claim for Benefits includes both Claims for Benefits requiring Preauthorization and Prior Approval (Preservice Claim for Benefits) and all other Claims for Benefits (Post Service Claim for Benefits). A Claim for Benefits involving payment of a claim shall be made promptly and in accordance with state law.

8.16 **CLASS OF COVERAGE** - the type of coverage the Subscriber is enrolled under, identifying who is eligible to receive benefits for Covered Services under this Benefit Plan. Classes of Coverage are as follows:

A. **Single Coverage** - Subscriber only.

B. **Family Coverage** - Subscriber and Eligible Dependents.

8.17 **COST SHARING AMOUNTS** - the dollar amount a Member is responsible for paying when Covered Services are received from a Health Care Provider. Cost Sharing Amounts include Coinsurance, Copayment and Deductible Amounts. Applicable Cost Sharing Amounts are identified on the Benefit Plan Attachment. Health Care Providers may bill you directly or request payment of Coinsurance, Copayment and Deductible Amounts at the time services are provided. See Section 1, Schedule of Benefits for the specific Cost Sharing Amounts that apply to this Benefit Plan.

A. **Coinsurance Amount** - a percentage of the Allowed Charge for Covered Services that is a Member's responsibility.

BCBSND shall calculate Coinsurance Amounts on behalf of Members obtaining Covered Services within the BCBSND service area on the lesser of (1) billed charges or (2) provider negotiated payment rates (Allowed Charge).

If Covered Services are obtained by a Member out of the BCBSND service area, the local Blue Cross Blue Shield Plan's (Host Plan) provider contract may require coinsurance calculation that is not based on the discounted price the Health Care Provider has agreed to accept from the Host Plan. Rather, it may be based on the Health Care Provider's billed charges. This may result in a significantly higher Coinsurance Amount for certain services a Member incurs out of the BCBSND service area. It is not possible to provide specific information for each out-of-area Health Care Provider because of the many different arrangements between Host Plans and Health Care Providers. However, if a Member contacts BCBSND prior to incurring out-of-area services, BCBSND may be able to provide information regarding specific Health Care Providers.

B. **Coinsurance Maximum Amount** - the total Coinsurance Amount that is a Member's responsibility during a Benefit Period. The Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period.

C. **Copayment Amount** - a specified dollar amount payable by the Member for certain Covered Services. Health Care Providers may request payment of the Copayment Amount at the time of service. Copayment Amounts do not apply toward the Out-of-Pocket Maximum Amount or the Prescription Medication or Drug Coinsurance Maximum Amount.

D. **Deductible Amount** - a specified dollar amount payable by the Member for certain Covered Services received during the Benefit Period. The Deductible Amount renews on January 1 of each consecutive Benefit Period. Copayment Amounts do not apply toward the Deductible Amount.

The Deductible Amounts for Covered Services received from a PPO Health Care Provider or on a Basic Plan basis accumulate jointly up to the PPO Deductible Amount.

E. **Out-of-Pocket Maximum Amount** - the total Deductible and Coinsurance Amounts for certain Covered Services that are a Member's responsibility during a Benefit Period. When the Out-of-Pocket Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Covered Services, less Copayment Amounts incurred during the remainder of the Benefit Period. The Out-of-Pocket Maximum Amount renews on January 1 of each consecutive Benefit Period. Copayment Amounts and the Outpatient Prescription Medication or Drug Cost Sharing Amounts do not apply toward the Out-of-Pocket Maximum Amount.

The Out-of-Pocket Maximum Amounts for Covered Services received from a PPO Health Care Provider or on a Basic Plan basis accumulate jointly up to the PPO Out-of-Pocket Maximum Amount. When the PPO Out-of-Pocket Maximum Amount has been met, all Covered Services received from a PPO Health Care Provider will be paid at 100% of Allowed Charge. Covered Services sought on a Basic Plan basis will continue to be paid at 75% of the Allowed Charge until the Out-of-Pocket Maximum Amount for Basic Plan services is met.

F. **Prescription Medication or Drug Coinsurance Maximum Amount** - the total Formulary Coinsurance Amount for Outpatient Prescription Medications or Drugs that is a Member's responsibility during a Benefit Period. When this Coinsurance Maximum Amount is met, this Benefit Plan will pay 100% of the Allowed Charge for Formulary Outpatient Prescription Medications or Drugs, less Copayment Amounts incurred during the remainder of the Benefit Period. This Coinsurance Maximum Amount renews on January 1 of each consecutive Benefit Period. Copayment Amounts do not apply toward this Coinsurance Maximum Amount.

G. **Infertility Services Deductible Amount** - a specified dollar amount payable by the Member during their lifetime for infertility services. The Infertility Services Deductible Amount does not apply toward the Out-of-Pocket Maximum Amount.

8.18 **COVERED SERVICE** - Medically Appropriate and Necessary services and supplies for which benefits are available when provided by a Health Care Provider.

8.19 **CUSTODIAL CARE** - care that BCBSND determines is designed essentially to assist the patient in meeting the activities of daily living and not primarily provided for its therapeutic value in the treatment of an illness, disease, injury or condition.

8.20 **DIAGNOSTIC SERVICE** - a test or procedure provided because of specific symptoms and directed toward the determination of a definite condition. A Diagnostic Service must be ordered by a Professional Health Care Provider. Diagnostic Services include, but are not limited to X-ray and other imaging services, laboratory and pathology services, cardiographic, encephalographic and radioisotope tests.

8.21 **ELIGIBLE DEPENDENT** - a dependent of the Subscriber who qualifies for membership under this Benefit Plan in accordance with the requirements specified below:

A. The Subscriber's spouse under a legally existing marriage between persons of the opposite sex.

B. The Subscriber's or the Subscriber's living, covered spouse's unmarried children under the age of 23 years who are financially dependent on the Subscriber or the Subscriber's spouse. Children are considered under age 23 until the end of the month in which the child becomes 23 years of age. The term child or children includes:

1. Children physically placed with the Subscriber for adoption or whom the Subscriber or the Subscriber's living, covered spouse has legally adopted.

2. Children living with the Subscriber for whom the Subscriber or the Subscriber's living, covered spouse has been appointed legal guardian by court order.

3. The Subscriber's grandchildren or those of the Subscriber's living, covered spouse if: (a) the parent of the grandchild is a covered Eligible Dependent under this Benefit Plan and (b) both the parent and the grandchild are primarily dependent on the Subscriber for support. If a lapse in coverage occurs due to ineligibility of the parent under this Benefit Plan, the grandchild cannot be reenrolled unless the Subscriber has been appointed legal guardian.

4. Children for whom the Subscriber or the Subscriber's living, covered spouse are required by court order to provide health benefits.

5. Children beyond the age of 23 who are full-time students at accredited institutions who are financially dependent on the Subscriber or the Subscriber's spouse. Coverage in such cases will be continued only until the end of the month in which the child becomes 26 years of age. An accredited institution is defined as an institution of higher education offering a degree or certificate in a specific field or trade for which the recipient may gain employment after completing course work. The institution must be licensed, certified or accredited.

6. Children beyond the age of 23 who are incapable of self support because of mental retardation or physical handicap that began before the child attained age 23 and who are primarily dependent on the Subscriber or the Subscriber's spouse for support. Coverage for such a disabled child will continue for as long as the child remains unmarried, disabled and the Subscriber's dependent for federal income tax purposes. The Subscriber may be asked periodically to provide evidence satisfactory to BCBSND of these disabilities.

8.22 **EMERGENCY MEDICAL CONDITION** - a medical condition of recent onset and severity, including severe pain, that would lead a prudent layperson acting reasonably and possessing an average knowledge of health and medicine to believe that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily function, serious dysfunction of any bodily organ or part or would place the person's health, or with respect to a pregnant woman the health of the woman or her unborn child, in serious jeopardy.

8.23 **EMERGENCY SERVICES** - health care services, supplies or treatments furnished or required to screen, evaluate and treat an Emergency Medical Condition.

8.24 **ENROLLMENT DATE** - the first day of coverage or, if there is a Probation Period, the first day of the Probation Period.

8.25 **EXPERIMENTAL OR INVESTIGATIVE** - a drug, device, medical service, treatment or procedure is Experimental or Investigative if:

A. the drug or device cannot be lawfully marketed without the approval of the U.S. Food and Drug Administration and approval for marketing has not been given at the time the drug or device is furnished; or

B. the drug, device, medical service, treatment or procedure, or the patient informed consent document utilized with the drug, device, medical service, treatment or procedure was reviewed and approved by the treating facility's institutional review board as required by federal law; or

C. BCBSND determines that there exists reliable evidence that the drug, device, medical service, treatment or procedure

1. is the subject of ongoing phase 1 or phase 2 clinical trials,

2. is the research, experimental, study or investigational arm of an ongoing phase 3 clinical trial, or

3. is otherwise under study to determine its maximum tolerated dose, its toxicity, its safety, its efficacy or its efficacy as compared with a standard means of treatment or diagnosis; or

D. BCBSND determines that there exists reliable evidence with respect to the drug, device, medical service, treatment or procedure and that further studies or clinical trials are necessary to determine its maximum tolerated dose, its toxicity, its safety, its efficacy or its efficacy as compared with a standard means of reliable treatment or diagnosis; or

E. BCBSND determines that based on prevailing medical evidence the drug, device, medical service, treatment or procedure is Experimental or Investigative.

Reliable evidence shall mean only published reports and articles in the authoritative medical and scientific literature; the written protocol or protocols used by the treating facility or the protocol(s) of another facility studying substantially the same drug, device, medical service, treatment or procedure; or the written informed consent used by the treating facility or by another facility studying substantially the same drug, device, medical service, treatment or procedure.

8.26 **EXPLANATION OF BENEFITS** - a document sent to the Member by BCBSND after a claim for reimbursement has been processed. It includes the patient's name, claim number, type of service, Health Care Provider, date of service, charges submitted for the services, amounts covered by this Benefit Plan, noncovered services, Cost Sharing Amounts and the amount of the charges that are the Subscriber's responsibility. This form should be carefully reviewed and kept with other important records.

8.27 **GROUP** - NDPERS has signed an agreement with BCBSND to provide health care benefits for its eligible employees and Eligible Dependents, see definition 8.21.

8.28 **HEALTH CARE PROVIDER** - Institutional or Professional Health Care Providers providing Covered Services to Members as listed below. The Health Care Provider must be licensed, registered or certified by the appropriate state agency where the Covered Services are performed and provided in accordance with the Health Care Provider's scope of licensure as provided by law. Where there is no appropriate state agency, the Health Care Provider must be registered or certified by the appropriate professional body. A Health Care Provider includes but is not limited to:

A. **Advanced Practice Registered Nurse** - Including a Clinical Nurse Specialist, Certified Registered Nurse Anesthetist (CRNA), Certified Nurse Midwife, Nurse Practitioner or Psychiatric Nurse.

B. **Ambulance** - a specially designed or equipped vehicle used only for transporting the critically ill or injured to a health care facility. The ambulance service must meet state and local requirements for providing transportation for the sick or injured and must be operated by qualified personnel who are trained in the application of basic life support.

C. **Ambulatory Surgical Facility** - a facility with an organized staff of Professional Health Care Providers that:

1. has permanent facilities and equipment for the primary purpose of performing surgical procedures on an outpatient basis;

2. provides treatment by or under the direct supervision of a Professional Health Care Provider;

3. does not provide inpatient accommodations; and

4. is not, other than incidentally, a facility used as an office or clinic for the private practice of a Professional Health Care Provider.

D. **Audiologist**.

E. **Certified Diabetes Educator** (C.D.E.).

F. **Chiropractor** - a Doctor of Chiropractic (D.C.).

G. **Dentist** - a Doctor of Dental Surgery (D.D.S.) or Doctor of Dental Medicine (D.M.D.).

H. **Home Health Agency** - an agency providing, under the direction of a Professional Health Care Provider, skilled nursing and related services to persons in their place of residence.

I. **Home Infusion Therapy Provider**.

J. **Home Medical Equipment Supplier**.

K. **Hospice** - an organization that provides medical, social and psychological services in the home or inpatient facility as palliative treatment for patients with a terminal illness and life expectancy of less than 6 months.

L. **Hospital** - an institution that is engaged in providing inpatient and outpatient diagnostic and therapeutic services for the diagnosis, treatment and care of sick and injured persons by or under the direct supervision of Professional Health Care Providers.

M. **Independent Clinical Laboratory** - a medical laboratory providing Diagnostic Services that is approved for reimbursement by BCBSND and is not affiliated or associated with a Hospital or Professional Health Care Provider otherwise providing patient services.

N. **Licensed Addiction Counselor**.

O. **Licensed Clinical Psychologist** - a licensed psychologist with a doctorate degree in psychology who is eligible for listing in the National Register of Health Service Providers in Psychology.

P. **Licensed Independent Clinical Social Worker** - an individual who has a doctorate or master's degree in social work from a college or university and who has fulfilled the requirements for licensure or has been registered by the North Dakota Board of Social Work Examiners for third party reimbursement before August 1, 1997.

Q. **Licensed Professional Clinical Counselor**.

R. **Licensed Registered Dietitian**.

S. **Long Term Acute Care Facility** - a facility that provides long-term acute hospital care for medically complex conditions or specialized treatment programs.

T. **Mobile Radiology Supplier**.

U. **Occupational Therapist**. see 8.74

V. **Optometrist** - a Doctor of Optometry (O.D.).

W. **Oral Pathologist** - a Doctor of Dental Surgery (D.D.S.) meeting all formal requirements for certification by the American Board of Oral Pathologists.

X. **Oral Surgeon** - a Doctor of Dental Surgery (D.D.S.) meeting all formal requirements for certification by the American Board of Oral Surgery.

Y. **Pain Treatment Facility** - a facility that has satisfied the CARF accreditation requirements of a chronic pain management program.

Z. **Pharmacist**.

AA. **Pharmacy** - an establishment where the profession of pharmacy is practiced by a Pharmacist.

BB. **Physical Therapist**. see

CC. **Physician** - a Doctor of Medicine (M.D.) or a Doctor of Osteopathy (D.O.).

DD. **Physician Assistant**.

EE. **Podiatrist** - a Doctor of Podiatry (D.P.), a Doctor of Surgical Chiropody (D.S.C.), a Doctor of Podiatric Medicine (D.P.M.) or a Doctor of Surgical Podiatry (D.S.P.).

FF. **Psychiatric Care Facility** - an institution or a distinct part of an institution providing diagnostic and therapeutic services for the inpatient treatment of mental illness under the direct supervision of a Professional Health Care Provider.

GG. **Rehabilitation Facility** - an institution or a distinct part of an institution providing Rehabilitative Therapy.

HH. **Residential Treatment Center**.

II. **Respiratory Therapist**.

JJ. **Skilled Nursing Facility** - an institution or a distinct part of an institution providing skilled nursing and related services to persons on an inpatient basis under the direct supervision of a Professional Health Care Provider.

KK. **Sleep Lab**.

LL. **Speech Therapist**. see

MM. **Substance Abuse Facility** - an institution or a distinct part of an institution providing detoxification or rehabilitation treatment for alcohol or other drug abuse.

NN. **Transitional Care Unit** - a sub-acute unit of a Hospital that provides skilled services necessary for the transition between Hospital and home or to a lower level of care.

8.29 **HOME HEALTH CARE** - Skilled Nursing Services provided under active Physician and nursing management through a central administrative unit coordinated by a registered nurse. Benefit eligibility requires that the Member's medical condition must be such that, without the availability of Skilled Nursing Services, the Member would require inpatient care.

8.30 **HOME HEALTH VISIT** - the provision of skilled nursing and other therapeutic services up to a maximum of 8 hours per day to a Member confined to their home.

8.31 **HOME MEDICAL EQUIPMENT** - items that can withstand repeated use and are primarily used to serve a medical purpose outside of a health care facility. Such items would not be of use to a person in the absence of illness, injury or disease.

8.32 **IDENTIFICATION CARD** - a card issued in the Subscriber's name identifying the Benefit Plan Number and the Network of the Member. If a Member is also enrolled in a primary Medicare Part D Plan, a card for this Benefit Plan may be issued in the Member's name.

8.33 **IMMEDIATE FAMILY** - a person who ordinarily resides in a Member's household or is related to the Member, Including a Member's parent, sibling, child or spouse, whether the relationship is by blood or exists in law.

8.34 **INCLUDING** - means including, but not limited to.

8.35 **INPATIENT** - a person confined as a registered patient in a Hospital, Skilled Nursing Facility, Substance Abuse Facility, Psychiatric Care Facility or other Institutional Health Care Provider.

8.36 **INSTITUTIONAL HEALTH CARE PROVIDER** - an Ambulance, Home Health Agency, Home Medical Equipment Supplier, Hospital, Long Term Acute Care Facility, Mobile Radiology Supplier, Pain Treatment Facility, Pharmacy, Psychiatric Care Facility, Rehabilitation Facility, Residential Treatment Center, Skilled Nursing Facility, Sleep Lab, Substance Abuse Facility or Transitional Care Unit.

8.37 **LATE ENROLLEE** - an eligible employee or Eligible Dependent who requests enrollment under this Benefit Plan after the initial enrollment period when the individual was entitled to enroll under the terms of this Benefit Plan and applies for coverage during the Annual Enrollment Period. However, an eligible employee or Eligible Dependent may not be considered a Late Enrollee if:

A. The individual:

1. was covered under Qualifying Previous Coverage at the time of the initial enrollment;

2. lost coverage under Qualifying Previous Coverage as a result of termination of employment or eligibility, the involuntary termination of the Qualifying Previous Coverage, death of a spouse or divorce; and

3. requests enrollment within 31 days after termination of the Qualifying Previous Coverage.

B. The individual is employed by an employer that offers multiple health benefit plans and the individual elects a different plan during an open enrollment period.

C. A court has ordered coverage be provided for a spouse or minor or dependent child under the eligible employee's Benefit Plan and the request for enrollment is made within 30 days after issuance of the court order.

D. The individual had coverage under a Consolidated Omnibus Budget Reconciliation Act [Pub. L. 99-272; 100 Stat. 82] continuation provision and the coverage under that provision was exhausted.

8.38 **LIFETIME MAXIMUM** - the total dollar amount of Covered Services an eligible Member may receive during a lifetime while enrolled under a Benefit Plan sponsored by the Group. The benefit amounts paid under all previous Benefit Plans sponsored by the Group will be applied toward the Lifetime Maximum of this Benefit Plan.

8.39 **MAINTENANCE CARE** - treatment provided to a Member whose condition/progress has ceased improvement or could reasonably be expected to be managed without the skills of a Health Care Provider. Exception: periodic reassessments are not considered Maintenance Care.

8.40 **MAXIMUM BENEFIT ALLOWANCE** - the maximum amount of benefits expressed in dollars, days or visits, available under this Benefit Plan for a specified Covered Service.

8.41 **MEDICAL DIRECTOR** - the Physician designated by BCBSND and the Network to oversee and direct all matters pertaining to the management of the benefits for medical care and treatment.

8.42 **MEDICALLY APPROPRIATE AND NECESSARY** - services, supplies or treatments provided by a Health Care Provider to treat an illness or injury that satisfy all the following criteria as determined by BCBSND:

A. The services, supplies or treatments are medically required and appropriate for the diagnosis and treatment of the Member's illness or injury;

B. The services, supplies or treatments are consistent with professionally recognized standards of health care; and

C. The services, supplies or treatments do not involve costs that are excessive in comparison with alternative services that would be effective for diagnosis and treatment of the Member's illness or injury.

8.43 **MEMBER** - the Subscriber and, if another Class of Coverage is in force, the Subscriber's Eligible Dependents.

8.44 **NONPARTICIPATING HEALTH CARE PROVIDER** - a Health Care Provider that does not have a participation agreement with BCBSND.

8.45 **NONPAYABLE HEALTH CARE PROVIDER** - a Health Care Provider that is not reimbursable by BCBSND. No benefits will be available for Covered Services prescribed by, performed by or under the direct supervision of a Nonpayable Health Care Provider.

8.46 **OFFICE VISIT** - a professional service, Including an examination for the purpose of diagnosing or treating an illness or injury or the determination, initiation or monitoring of a treatment plan provided in an outpatient setting by a Professional Health Care Provider.

8.47 **ORTHOTIC DEVICES** - any rigid or semi-rigid supportive device that restricts or eliminates the motion of a weak or diseased body part.

8.48 **OUTPATIENT** - a person treated as a registered Outpatient at a Hospital, clinic or in a Professional Health Care Provider's office, who is not, at the time of treatment, a registered patient in a Hospital, Skilled Nursing Facility, Substance Abuse Facility, Psychiatric Care Facility or other Institutional Health Care Provider.

8.49 **PARTIAL HOSPITALIZATION** - continuous treatment of mental illness or substance abuse by a Health Care Provider for at least 3 hours, but not more than 12 hours in any 24-hour period. Preauthorization is required.

8.50 **PARTICIPATING HEALTH CARE PROVIDER** - a Health Care Provider that has entered into a participation agreement with BCBSND to provide Covered Services to a Member for an agreed upon payment.

8.51 **PARTICIPATING PHARMACY** - a Pharmacy that has entered into an agreement with BCBSND's Preferred Pharmacy Network.

8.52 **PLAN ADMINISTRATOR** - the administrator of the Plan as defined by Section 3(16) of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).

8.53 **PREAUTHORIZATION** - the process of the Member or the Member's representative notifying BCBSND to request approval for specified services. Eligibility for benefits for services requiring Preauthorization is contingent upon compliance with the provisions of Section 3.2. Preauthorization does not guarantee payment of benefits.

8.54 **PREEXISTING CONDITION** - a condition, disease, illness or injury for which the Member received medical advice or treatment within the 6-month period immediately preceding the Member's Enrollment Date under this Benefit Plan. Pregnancy is not considered a Preexisting Condition.

8.55 **PRESCRIPTION MEDICATION OR DRUG** - any legend drug, Payable Over-the-Counter Drug, biologic or insulin that is lawfully dispensed according to federal laws upon receipt of a Prescription Order and is approved by the U.S. Food and Drug Administration for the treatment of the disease or illness for which the Member is receiving care.

A. **Brand Name** - the registered trademark name of a Prescription Medication or Drug by its manufacturer, labeler or distributor.

B. **Formulary Drug** - a Brand Name or Generic Prescription Medication, Drug, or diabetes supply that is a safe, therapeutically effective, high quality and cost effective drug as determined by a committee of Physicians and Pharmacists.

C. **Generic** - the established name or official chemical name of the drug, drug product or medicine.

D. **Nonformulary Drug** - a Prescription Medication, Drug, or diabetes supply that is not a Formulary Drug.

E. **Nonpayable Drug** - a Prescription Medication or Drug that is not reimbursed by BCBSND or is included in Section 4, Exclusions.

F. **Payable Over-the-Counter (OTC) Drug** - a medication or drug approved by the U.S. Food and Drug Administration for marketing without a Prescription Order and approved by BCBSND when dispensed by a Pharmacist upon the receipt of a Prescription Order.

G. **Restricted Use Drug** - a Prescription Medication or Drug that may require Prior Approval and/or be subject to a limited dispensing amount.

8.56 **PRESCRIPTION ORDER** - the order for a Prescription Medication or Drug issued by a Professional Health Care Provider licensed to make such order in the ordinary course of professional practice.

8.57 **PRIOR APPROVAL** - the process of the Member or Member's representative providing information to BCBSND substantiating the medical appropriateness of specified services to BCBSND in order to receive benefits for such service. This information must be submitted in writing from the Member's Health Care Provider. BCBSND reserves the right to deny benefits if Prior Approval is not obtained.

8.58 **PROBATION PERIOD** - the period that must pass before an employee or dependent is eligible for coverage in a group health plan.

8.59 **PROFESSIONAL HEALTH CARE PROVIDER** - an Advanced Practice Registered Nurse, Ambulatory Surgical Facility, Audiologist, Certified Diabetes Educator, Chiropractor, Dentist, Home Infusion Therapy Provider, Independent Clinical Laboratory, Licensed Addiction Counselor, Licensed Clinical Psychologist, Licensed Independent Clinical Social Worker, Licensed Professional Clinical Counselor, Licensed Registered Dietitian, Occupational Therapist, Optometrist, Oral Pathologist, Oral Surgeon, Pharmacist, Physical Therapist, Physician, Physician Assistant, Podiatrist, Respiratory Therapist or Speech Therapist as defined.

8.60 **PROSTHETIC APPLIANCE** - a fixed or removable artificial body part that replaces an absent natural part, excluding Prosthetic Limbs.

8.61 **PROSTHETIC LIMB** - a fixed or removable artificial body part that replaces all or part of an absent arm or leg.

8.62 **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from or on behalf of a Member that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

A. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
B. relates to a Member's past, present or future physical or mental health or condition;
C. relates to the provision of health care to a Member;
D. relates to the past, present, or future payment for health care to or on behalf of a Member; or
E. identifies a Member or could reasonably be used to identify a Member.

Educational records and employment records are not considered PHI under federal law.

8.63 **QUALIFYING PREVIOUS COVERAGE** - with respect to an individual, health benefits or coverage provided under any of the following:

A. A group health benefit plan;
B. A health benefit plan;
C. Medicare;
D. Medicaid;
E. TRICARE (the health care program for military dependents and retirees);
F. A medical care program of the Indian health service or of a tribal organization;
G. A state health benefit risk pool, including coverage issued under N.D. Cent. Code §26.1-08;
H. A health plan offered under §5 U.S.C. 89;
I. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government or a foreign government;
J. A health benefit plan under §5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and
K. A state children's health insurance program (SCHIP).

Qualifying Previous Coverage must be continuous until at least 63 days prior to the individual Member's Enrollment Date under this Benefit Plan.

8.64 **RESIDENTIAL TREATMENT** - a 24 hour a day program under the clinical supervision of a Health Care Provider, in a residential treatment center other than an acute care hospital, for the active treatment of chemically dependent or mentally ill persons. The residential treatment center must be licensed by the state of North Dakota. If the residential treatment center is located outside the state of North Dakota, it must meet the North Dakota licensure requirements. Preauthorization is required.

8.65 **SKILLED NURSING SERVICES** - services that can be safely and effectively performed only by or under the direct supervision of licensed nursing personnel and under the direct supervision of a Professional Health Care Provider.

8.66 **SPECIAL CARE UNIT** - a section, ward or wing within a Hospital operated exclusively for critically ill patients and provides special supplies, equipment and constant observation and care by registered nurses or other highly trained personnel, excluding any section, ward or wing within a Hospital maintained for the purpose of providing normal postoperative recovery treatment services.

8.67 **SUBSCRIBER** - an employee whose application for membership has been accepted, whose coverage is in force with BCBSND and in whose name the Identification Card and Benefit Plan Attachment are issued. A Subscriber is an eligible employee or other individual who meets and continues to meet all applicable eligibility requirements and who is enrolled and actually covered under this Benefit Plan.

8.68 **SURGICAL SERVICES** - the performance of generally accepted operative and cutting procedures by a Professional Health Care Provider.

8.69 **THERAPY SERVICES** - the following services when provided according to a prescribed plan of treatment ordered by a Professional Health Care Provider and used for the treatment of an illness or injury to promote recovery of the Member:

A. **Chemotherapy** - the treatment of malignant disease by chemical or biological antineoplastic agents approved and administered in accordance with the approval granted by the U.S. Food and Drug Administration and/or listed as an accepted unlabeled use by the current edition of the USPDI Drug Information for the Health Care Professional and is determined by BCBSND to have been administered in accordance with standard medical practice.

B. **Dialysis Treatment** - the process of diffusing blood across a semipermeable membrane to remove toxic materials and to maintain fluid, electrolyte and acid-base balance in cases of impaired kidney function or absence of the kidneys.

C. **Occupational Therapy** - the treatment of physical or psychological dysfunction by or under the direct supervision of a licensed Occupational Therapist designed to improve and maximize independence in perceptual-motor skills, sensory integrative functioning, strength, flexibility, coordination, endurance, essential activities of daily life and preventing the progression of a physical or mental disability.

D. **Physical Therapy** - the treatment of disease, injury or medical condition by the use of therapeutic exercise and other interventions by or under the direct supervision of a licensed Physical Therapist that focuses on improving posture, locomotion, strength, endurance, balance, coordination, joint mobility, flexibility, age appropriate motor skills, alleviating pain and preventing the progression of a physical or mental disability.

E. **Radiation Therapy** - the treatment of disease by the flow of a radiation beam of therapeutically useful radiant energy, through a defined area; Including emission of X-rays, gamma rays, electrons or other radiations from a treatment machine.

F. **Respiratory Therapy** - the introduction of dry or moist gases into the lungs when performed by or under the direct supervision of a registered or certified Respiratory Therapist.

G. **Speech Therapy** - the treatment of speech and language disorders that result in communication disabilities and swallowing disorders when provided by or under the direct supervision of a certified and licensed Speech Therapist. Speech Therapy services facilitate the development of human communications and swallowing through assessment, diagnosis and treatment when disorders occur due to disease, surgery, trauma, congenital anomaly or prior therapeutic process.

Certificate of Insurance
& Summary Plan Description

NORTH DAKOTA
PUBLIC EMPLOYEES
RETIREMENT SYSTEM
DAKOTA PLAN

Dakota Retiree Plan

July 1, 2009

Health Care Coverage

BlueCross BlueShield
of North Dakota
An independent licensee of the Blue Cross & Blue Shield Association

Blue Cross Blue Shield of North Dakota
NDPERS Service Center

Questions? Our Service Center staff is available to answer questions about your coverage

Call the Service Center:

Monday through Friday

8:00 a.m. - 5:00 p.m. – CST

(701) 282-1400

or

1-800-223-1704

North Dakota Relay Service: 1-800-366-6888

Office Address and Hours: You may visit our Home Office during normal business hours

Monday through Friday

8:00 a.m. - 4:30 p.m. – CST

Blue Cross Blue Shield of North Dakota
4510 13th Ave. South
Fargo, North Dakota 58121

Mailing Address: You may write to us at the following address:

Blue Cross Blue Shield of North Dakota
4510 13th Ave. South
Fargo, North Dakota 58121

BCBSND Internet Address: www.BCBSND.com
NDPERS Internet Address: www.nd.gov/ndpers

Your employer has established an employee welfare benefit plan for Eligible Employees and their Eligible Dependents. The following Certificate of Insurance is provided to you in the same manner as required under the Employee Retirement Income Security Act of 1974. Every attempt has been made to provide concise and accurate information. This Certificate of Insurance and the NDPERS Service Agreement is the official benefit plan document for the employee welfare benefit plan established by the Plan Administrator. In case of conflict between this Certificate of Insurance and the NDPERS Service Agreement, the provisions of the NDPERS Service Agreement will control.

Although it is the intention of the Plan Administrator to continue the employee welfare benefit plan for an indefinite period of time, the Plan Administrator reserves the right, whether in an individual case or in general, to eliminate the Benefit Plan.

BCBSND shall construe and interpret the provisions of the Service Agreement, the Certificate of Insurance and related documents, including doubtful or disputed terms and to determine all questions of eligibility; and to conduct any and all reviews of claims denied in whole or in part.

PLAN NAME

North Dakota Public Employees Retirement System – Dakota Retiree Plan

NAME AND ADDRESS OF EMPLOYER (PLAN SPONSOR)

NDPERS
400 East Broadway, Suite 505
Box 1657
Bismarck, North Dakota 58502

PLAN SPONSOR'S IRS EMPLOYER IDENTIFICATION NUMBER

45-0282090

TYPE OF WELFARE PLAN

Health

TYPE OF ADMINISTRATION

This employee welfare benefit plan is fully insured through BCBSND and issued by BCBSND.

NAME AND ADDRESS OF BCBSND

Blue Cross Blue Shield of North Dakota (BCBSND)
4510 13th Avenue South
Fargo, North Dakota 58121

PLAN ADMINISTRATOR'S NAME, BUSINESS ADDRESS AND BUSINESS TELEPHONE NUMBER

North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
Box 1657
Bismarck, North Dakota 58502
1-800-803-7377
701-328-3900

NAME AND ADDRESS OF AGENT FOR SERVICE OF LEGAL PROCESS

Plan Administrator:

Sparb Collins
North Dakota Public Employees Retirement System
400 East Broadway, Suite 505
Bismarck, North Dakota 58502

BCBSND:

Daniel E. Schwandt
Blue Cross Blue Shield of North Dakota
4510 13th Avenue South
Fargo, North Dakota 58121

Service of legal process may be made upon a Plan trustee or the Plan Administrator.

TITLE OF EMPLOYEES AUTHORIZED TO RECEIVE PROTECTED HEALTH INFORMATION

Benefit Programs Division
Research & Benefit Program Development Division
Accounting & IT Division
Administrative Services Division
Internal Audit Division
Executive Director

This includes every employee, class of employees, or other workforce person under control of the Plan Sponsor who may receive the Member's Protected Health Information relating to payment under, health care operations of, or other matters pertaining to the Benefit Plan in the ordinary course of business. These identified individuals will have access to the Member's Protected Health Information only to perform the plan administrative functions the Plan Sponsor provides to the Benefit Plan. Such individuals will be subject to disciplinary action for any use or disclosure of the Member's Protected Health Information in breach or in violation of, or noncompliance with, the privacy provisions of the Benefit Plan. The Plan Sponsor shall promptly report any such breach, violation, or noncompliance to the Plan Administrator; will cooperate with the Plan Administrator to correct the breach, violation and noncompliance to impose appropriate disciplinary action on each employee or other workforce person causing the breach, violation, or noncompliance; and will mitigate any harmful effect of the breach, violation, or noncompliance on any Member whose privacy may have been compromised.

STATEMENT OF ELIGIBILITY TO RECEIVE BENEFITS

Retirees or surviving spouses who are age 65 or entitled to Medicare and are receiving a retirement benefit from the Public Employees Retirement System, the Highway Patrolmen's Retirement System, the Teachers' Insurance and Annuity Association of America-College Retirement Equities Fund (TIAA-CREF), the Job Service Retirement System, Judges' Retirement System, the Teachers' Fund for Retirement (TFFR), or an eligible public retirement system are eligible to receive benefits.

An eligible retiree or surviving spouse is entitled to coverage if an application is submitted within 31 days of Medicare entitlement. Each eligible retiree may elect to enroll his/her Eligible Dependents. Eligible employees includes Medicare eligible retired and terminated employees and their Eligible Dependents who remain eligible to participated in the uniform group insurance program pursuant to applicable state law as provided in NDCC section 54-52.1-03(3). Medicare eligible and non-Medicare eligible members will receive separate Benefit Plans. For a comprehensive description of eligibility refer to the NDPERS web site. To obtain an application you must contact the NDPERS office by writing: NDPERS, Box 1657, Bismarck, ND 58502 or by calling 701-328-3900 or 1-800-803-7377.

Eligibility to receive benefits under the Benefit Plan is initially determined by the Plan Administrator. When an eligible employee meets the criteria for eligibility, a membership application must be completed. BCBSND has the ultimate decision making authority regarding eligibility to receive benefits.

DESCRIPTION OF BENEFITS

Refer to page 1 Covered Services Section.

SOURCES OF PREMIUM CONTRIBUTIONS TO THE PLAN AND THE METHOD BY WHICH THE AMOUNT OF CONTRIBUTION IS CALCULATED

The contributions for single and family coverage are paid by the retiree or surviving spouse. For retirees or surviving spouses that are eligible for the Retiree Health Insurance Credit Program, contributions are calculated using the accrued health credit as an offset to the gross premium.

END OF THE YEAR DATE FOR PURPOSES OF MAINTAINING THE PLAN'S FISCAL RECORDS

June 30

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SECTION 1
INTRODUCTION

This Benefit Plan describes the benefits available to You as a person enrolled under the Dakota Retiree - Blue Cross Blue Shield of North Dakota Medicare supplement Benefit Plan.

This Benefit Plan, together with Your application for coverage, is a legal agreement between Blue Cross Blue Shield of North Dakota (BCBSND), and You, the Subscriber, as named on Your Identification Card.

The benefits described are available as long as the required premium is paid. Changes to provisions or premium amounts by BCBSND will be sent to the Subscriber's address as shown on BCBSND records by ordinary mail no less than 31 days prior to the effective date of change.

Benefits described in this Benefit Plan are available to You for Your personal use only and cannot be transferred or assigned. Any attempt to transfer or assign the benefits of this Benefit Plan to ineligible persons will result in automatic termination of this Benefit Plan by BCBSND.

The Subscriber hereby expressly acknowledges and understands that BCBSND is an independent corporation operating under a license with the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans, (the "Association") permitting BCBSND to use the Blue Cross and Blue Shield Service Marks in the state of North Dakota, and that BCBSND is not contracting as an agent of the Association. The Subscriber further acknowledges and agrees this Benefit Plan was not entered into based upon representations by any person or entity other than BCBSND and that no person, entity, or organization other than BCBSND shall be held accountable or liable to the Subscriber for any of BCBSND's obligations to the Subscriber created under this Benefit Plan. This paragraph shall not create any additional obligations whatsoever on the part of BCBSND other than those obligations created under other provisions of this Benefit Plan.

SECTION 2
COVERED SERVICES

This Benefit Plan supplements Your Medicare Part A and Part B coverage by providing benefits for that portion of Medicare Cost Sharing Amounts applied to Medicare Eligible Expenses not paid by Medicare. Medicare Cost Sharing Amounts include Medicare Deductible, Coinsurance and Copayment Amounts. The benefits available under this Benefit Plan shall automatically change to coincide with any changes in the applicable Medicare Deductible, Coinsurance and Copayment Amounts. Premium may be modified to reflect such changes in the Cost Sharing Amounts.

You are entitled to the following covered services subject to the terms, conditions and limitations of this Benefit Plan.

2.1 INPATIENT HOSPITAL SERVICES

A. The Medicare Part A Deductible Amount applied during the initial 60 days of an inpatient Hospital Admission in a Benefit Period.

B. The Medicare Coinsurance Amounts applied to Medicare Eligible Expenses for days 61 through 90 of an Admission in any Benefit Period.

C. The Medicare Coinsurance Amounts applied to Medicare Eligible Expenses for Lifetime Reserve Days utilized after the 90th day of an Admission in any Benefit Period.

D. If an Admission continues beyond the 90th day and the Subscriber has utilized all of the Lifetime Reserve Days, benefits will be available for Medically Necessary care up to a lifetime maximum of an additional 365 days.

2.2 BLOOD SERVICES

A. The first 3 pints of blood under Medicare Part A.

B. The first 3 pints of blood and Medicare Coinsurance Amount applied under Medicare Part B.

2.3 SKILLED NURSING FACILITY SERVICES

Actual billed charges, up to the Medicare Coinsurance Amount, for days 21 through 100 of a Medicare Eligible Skilled Nursing Facility Admission. No benefits will be available if the Admission is not approved by Medicare.

2.4 MEDICARE PART B ELIGIBLE EXPENSES

The Medicare Deductible and Coinsurance Amounts, or in the case of Hospital outpatient department services paid under a prospective payment system, the Copayment Amounts, applied to Medicare Eligible Expenses, regardless of Hospital confinement.

2.5 MEDICARE PART B EXCESS CHARGES

In addition to the Medicare Deductible and Coinsurance Amounts, this Benefit Plan provides benefits for the difference between the actual Medicare Part B allowed charge and the actual charge for the service as billed, not to exceed any charge limitation established by the Medicare program.

2.6 BENEFITS FOR EMERGENCY CARE IN A FOREIGN COUNTRY

If You require care or treatment while You are outside of the United States, You will be entitled to benefits at 80% of the allowed charge for those Medically Necessary services that would have been Medicare Eligible Expenses, as well as the covered services provided by this Benefit Plan, if the care or treatment is received during the first 60 consecutive days of the trip. Benefits will be subject to a Calendar Year deductible amount of $250 and a lifetime benefit maximum of $50,000.

SECTION 3
EXCLUSIONS

3.1 EXCLUSIONS

No benefits are available for:

1. Services received prior to the Effective Date of this Benefit Plan.
2. Services when benefits are provided by any governmental unit or social agency, except for Medicaid, or when payment has been made under Medicare Part A or Part B. Medicare Part A and Part B will be considered the primary payor with respect to benefit payments unless otherwise required by federal law.
3. Services that are experimental or investigative in nature or that are not Medically Necessary as determined by Medicare.
4. Outpatient prescription drugs, unless eligible under Medicare.
5. Services received from a Hospital or a distinct part of a Hospital located in the United States that is not certified by Medicare.
6. Custodial care provided in a Hospital or by a home health agency.
7. Skilled Nursing Facility care costs beyond what is covered by Medicare and this Benefit Plan.
8. Surgery and related services intended solely to improve appearance, but not to restore bodily function or to correct deformity resulting from disease, trauma, congenital or developmental anomalies or previous therapeutic processes.
9. Services when benefits are provided or available under any workers' compensation, employers' liability or similar law, or motor vehicle no-fault plan, unless prohibited by law.
10. Services, treatments or supplies that are not a Medicare Eligible Expense.

SECTION 4
GENERAL PROVISIONS

4.1 PAYMENT OF PREMIUM

A. This Benefit Plan continues and renews each month subject to the payment of premium and benefit plan provisions in effect on the date of renewal.

B. All premium is due and payable before the first of the month. If premium is not received before the date due, a grace period of 31 days is allowed. The Subscriber remains responsible for payment of any premium due during the grace period.

   In the event of termination for nonpayment of premium, reinstatement of this Benefit Plan will be at the sole discretion of and subject to conditions established by BCBSND.

C. If a Subscriber is enrolled under a Benefit Plan for which premium amounts are determined according to age and it is determined the age has been misstated or miscalculated, premium adjustments will be made as follows:

1. If premium amounts were paid in excess of the amount due, the excess premium will be refunded.
2. If the premium amount billed was less than required for the age, premium will be increased on the next billing date.

4.2 AUTOMATIC PAYMENT WITHDRAWAL

By completing the automatic payment withdrawal authorization, the Subscriber authorizes their financial institution to periodically deduct the current premium from their bank account and to remit same to NDPERS. This authorization will continue in effect until revoked in writing by the Subscriber. To cancel an automatic withdrawal authorization, notification must be received in writing by the NDPERS office by the 15th of the month prior to the month the change is effective.

4.3 TIME LIMIT ON CERTAIN DEFENSES

The validity of this Benefit Plan may not be contested, except for nonpayment of premium, after it has been in force for 2 years, beginning on the individual Subscriber's Effective Date. Further, the validity of this Benefit Plan may not be contested on the basis of a statement made relating to insurability by any Subscriber after continuous coverage has been in force for 2 years during the Subscriber's lifetime, unless the statement is written and signed by such Subscriber. This time limit does not apply to fraudulent misstatements.

4.4 NOTICE AND PROOF OF CLAIM

The Subscriber is responsible for providing BCBSND with written notice and proof of a claim for benefits within 24 months after the occurrence or commencement of a loss for which benefits are available under this Benefit Plan. The written notice and proof of claim must include the information necessary for BCBSND to determine benefits.

4.5 PAYMENT OF CLAIMS

Payment of claims will be made upon receipt of written notice and proof of a claim as provided in Section 4.4.

4.6 PHYSICAL EXAMINATIONS

BCBSND at its own expense may require a physical examination of the Subscriber as often as necessary during the pendency of a claim and may require an autopsy in case of death if the autopsy is not prohibited by law.

4.7 LIMITATION OF ACTIONS

No legal action may be brought for payment of benefits under this Benefit Plan prior to the expiration of 60 days following BCBSND's receipt of a claim for covered services or later than 3 years after the expiration of the time within which notice and proof of claim is required by this Benefit Plan.

4.8 PREMIUM REFUND/DEATH OF THE SUBSCRIBER

In the event of the Subscriber's death, BCBSND will refund to the Plan Administrator (NDPERS) all premiums paid beyond the month of the Subscriber's death, within 31 days after receiving notice of the death.

4.9 SUSPENSION OF COVERAGE

A. If the Subscriber is eligible for Medicaid benefits, the premium and benefits under this Benefit Plan will be suspended at the request of the Subscriber for the period (not to exceed 24 months) in which the Subscriber has applied for and is determined to be entitled under Medicaid. The Subscriber must request this suspension within 90 days of becoming eligible for Medicaid. Upon receipt of timely notice, BCBSND will return to the Subscriber that portion of the premium attributable to the period of Medicaid eligibility, subject to adjustment for paid claims.

B. If the Subscriber is no longer entitled to Medicaid, this Benefit Plan shall be reinstated (effective the date of termination of Medicaid eligibility) if the Subscriber provides notice of loss of Medicaid eligibility to BCBSND within 90 days after the date of such loss and pays the premium due from that date.

C. If the Subscriber is eligible for coverage under a group health plan, the premium and benefits under this Benefit Plan will be suspended at the request of the Subscriber for any period that may be provided by federal regulation. If the Subscriber loses coverage under the group health plan, this Benefit Plan will be reinstated effective the date of loss of group coverage, if the Subscriber provides notice of loss of group coverage to BCBSND within 90 days after the date of such loss and pays the premium due from that date.

D. Reinstatement of coverage as described in paragraphs B and C:

1. may not provide for any waiting period with respect to treatment of preexisting conditions;

2. must provide for coverage that is substantially equivalent to the coverage in effect before suspension; and

3. must provide for classification of premium on terms at least as favorable to the Subscriber as the terms that would have applied had the coverage not been suspended.

4.10 CANCELLATION OF THIS OR PREVIOUS BENEFIT PLANS

A. The Subscriber may cancel this Benefit Plan at any time by giving written notice to NDPERS in advance of the requested cancellation date. Coverage will be cancelled the 1st of the month following NDPERS's receipt of the request for cancellation. Premium paid beyond the date of cancellation will be refunded.

B. This Benefit Plan supersedes all Benefit Plans previously issued by BCBSND.

C. BCBSND may cancel this Benefit Plan for the following reasons:

1. Nonpayment of required premium.

2. Misrepresentation of a material fact by the Subscriber.

4.11 ASSIGNMENT OF RECORDS

The Subscriber agrees that any Health Care Provider or person(s) having information relating to an illness or injury for which benefits are claimed under this Benefit Plan may furnish such information to BCBSND upon request.

The Subscriber authorizes the Centers for Medicare and Medicaid Services to furnish information as to any payments under Medicare Part A or Part B to BCBSND for use in determining benefit payment under this Benefit Plan. BCBSND agrees to use this information only for the stated purpose.

4.12 CONFIDENTIALITY

All Protected Health Information (PHI) maintained by BCBSND under this Benefit Plan is confidential. Any PHI about You (the Subscriber) under this Benefit Plan obtained by BCBSND from You or from a Health Care Provider may not be disclosed to any person except:

A. Upon a written, dated, and signed authorization by the Subscriber or prospective Subscriber or by a person authorized to provide consent for a minor or an incapacitated person;

B. If PHI identifies the Health Care Provider, upon a written, dated, and signed approval by the Health Care Provider. However, BCBSND may disclose PHI to the Health Care Data Committee for the enhancement of price competition in the health care market. BCBSND may also disclose to a Health Care Provider, as part of a contract or agreement in which the Health Care Provider is a party, data or information that identifies a Health Care Provider as part of mutually agreed upon terms and conditions of the contract or agreement;

C. If the data or information does not identify either the Subscriber or prospective Subscriber or the Health Care Provider, the data or information may be disclosed upon request for use for statistical purposes or research;

D. Pursuant to statute or court order for the production or discovery of evidence; or

E. In the event of a claim or litigation between the Subscriber or prospective Subscriber and BCBSND in which the PHI is pertinent.

This section may not be construed to prevent disclosure necessary for BCBSND to conduct health care operations, Including utilization review or management consistent with state law, to facilitate payment of a claim, to analyze health plan claims or health care records data, to conduct disease management programs with Health Care Providers, or to reconcile or verify claims under a shared risk or capitation arrangement. This section does not apply to PHI disclosed by BCBSND as part of a research project approved by an institutional review board established under federal law. This section does not apply to PHI disclosed by BCBSND to the insurance commissioner for access to records of BCBSND for purposes of enforcement or other activities related to compliance with state or federal laws.

BCBSND has implemented administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of Your PHI that BCBSND creates, receives, maintains, or transmits.

4.13 PRIVACY OF PROTECTED HEALTH INFORMATION

BCBSND will not disclose the Subscriber's Protected Health Information (PHI) to the Group unless the Group certifies that the Benefit Plan has been amended to incorporate the privacy restrictions required under federal and state law, and agrees to abide by them.

BCBSND will disclose the Subscriber's PHI to the Group to carry out administrative functions under the terms of the Benefit Plan, but only in accordance with applicable federal and state law. Any disclosure to and use by the Group of the Subscriber's PHI will be subject to and consistent with this section. BCBSND will not disclose the Subscriber's PHI to the Group unless such disclosures are included in a notice of privacy practices distributed to the Subscriber. BCBSND will not disclose the Subscriber's PHI to the Group for actions or decisions related to the Subscriber's employment or in connection with any other benefits made available to the Subscriber.

The following restricts the Group's use and disclosure of the Subscriber's PHI:

A. The Group will neither use nor further disclose the Subscriber's PHI except as permitted by the Benefit Plan or required by law.

B. The Group will ensure that anyone who receives the Subscriber's PHI agrees to the restrictions and conditions of the Benefit Plan with respect to the Subscriber's PHI.

C. The Group will not use or disclose the Subscriber's PHI for actions or decisions related to the Subscriber's employment or in connection with any other benefit made available to the Subscriber.

D. The Group will promptly report to the Plan Administrator any use or disclosure of the Subscriber's PHI that is inconsistent with the uses and disclosures allowed under this section upon learning of such inconsistent use or disclosure.

E. In accordance with federal law, the Group will make PHI available to the Subscriber who is the subject of the information. Such information is subject to amendment and, upon proper notice, the Group will amend the Subscriber's PHI where appropriate.

F. The Group will document disclosures it makes of the Subscriber's PHI so the Plan Administrator is able to provide an accounting of disclosures as required under applicable state and federal law.

G. The Group will make its internal practices, books, and records relating to its use and disclosure of the Subscriber's PHI available to the Plan Administrator and to the U.S. Department of Health and Human Services as necessary to determine compliance with federal law.

H. The Group will, where feasible, return or destroy all Subscribers PHI in whatever form or medium received from the Plan Administrator, including all copies of and any data or compilations derived from and allowing identification of any Subscriber when the Subscriber's PHI is no longer needed for the plan administration functions for which the disclosure was made. If it is not feasible to return or destroy all Subscriber PHI, the Group will limit the use or disclosure of any Subscriber PHI to those purposes that make the return or destruction of the information infeasible.

4.14 NOTICE OF PRIVACY PRACTICES

BCBSND maintains a Notice of Privacy Practices. This Notice of Privacy Practices outlines BCBSND's uses and disclosures of PHI, sets forth BCBSND's legal duties with respect to PHI and describes Your rights with respect to PHI. You can obtain a Notice of Privacy Practices by contacting Member Services at the telephone number and address on the back of Your Identification Card or by visiting the BCBSND website.

4.15 SECURITY MEASURES FOR ELECTRONIC PROTECTED HEALTH INFORMATION

A. The Group will implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Subscribers' electronic PHI that the Group creates, receives, maintains, or transmits on the Plan Administrator's behalf.

B. The Group will report to the Plan Administrator any attempted or successful (1) unauthorized access, use, disclosure, modification, or destruction of Subscribers' electronic PHI or (2) interference with the Group's system operations in the Group's information systems, of which the Group becomes aware, except any such security incident that results in disclosure of Subscribers' PHI not permitted by the Benefit Plan must be reported to the Plan Administrator as required by 4.13 (D).

C. The Group will support the adequate separation between the Group and the Plan Administrator, as specified in the Benefit Plan, with reasonable and appropriate security measures.

4.16 CONFORMITY WITH STATE STATUTES

Any provision of this Benefit Plan that, on its effective date, is in conflict with the statutes of the state of North Dakota on such date is hereby amended to conform to the minimum requirements of such statutes.

4.17 CERTIFICATE OF CREDITABLE COVERAGE

When coverage under this Benefit Plan is terminated, BCBSND will, within a reasonable period of time, issue a Certificate of Creditable Coverage to the Subscriber. Certificates of Creditable Coverage may also be obtained from BCBSND upon request within 24 months after coverage is terminated. Certificates of Creditable Coverage will only reflect continuous coverage provided through BCBSND.

SECTION 5
OTHER PARTY LIABILITY

5.1 MEDICAL PAYMENT BENEFIT COORDINATION

If a Subscriber is eligible for medical payment benefits provided by any other collectible insurance as a result of an injury, the benefits available under this Benefit Plan will be reduced by and coordinated with the medical payment benefits provided by any other collectible insurance not prohibited from coordination of benefits.

5.2 RIGHTS OF SUBROGATION, REIMBURSEMENT AND ASSIGNMENT

If BCBSND pays benefits for covered services to or for a Subscriber for any injury or condition caused or contributed to by the act or omission of any third party, BCBSND shall have certain rights of assignment, subrogation and/or reimbursement as set forth below. BCBSND has full discretionary authority to determine whether to exercise any or all of said rights.

A Subscriber must notify BCBSND of the circumstances of the injury or condition, cooperate with BCBSND in doing whatever is necessary to enable BCBSND to assert these rights, and do nothing to prejudice them. The rights stated herein apply automatically in any applicable situation. BCBSND has no obligation to notify a Subscriber of BCBSND's intent to exercise one or more of these rights and BCBSND's failure to provide such a notice shall not constitute a waiver of these rights.

If a Subscriber does not comply with these provisions or otherwise prejudices the rights of BCBSND to assignment, subrogation or reimbursement, BCBSND shall have full discretion to withhold payment of any future benefits to or for the Subscriber and to off set the benefits already paid to or for the Subscriber against the payment of any future benefits to or for the Subscriber regardless of whether or not said future benefits are related to the injury or condition.

A. Right of Assignment and/or Subrogation: If a Subscriber fails to bring a claim against a third party (including any person, firm or corporation which may be liable for or on behalf of the third party), BCBSND has the right to bring said claim as the assignee and/or subrogee of the Subscriber and to recover any benefits paid under this Benefit Plan.

B. Right of Reimbursement: If a Subscriber makes any recovery from a third party (including any person, firm or corporation which may be liable for or on behalf of the third party), whether by judgment, settlement or otherwise, the Subscriber must notify BCBSND of said recovery and must reimburse BCBSND to the full extent of any benefits paid by BCBSND, not to exceed the amount of the recovery. This right of reimbursement shall apply to any such recovery to the extent of any benefits paid under this Benefit Plan even if the Subscriber has not received full compensation for the injury or condition. Any recovery the Subscriber may obtain is conclusively presumed to be for the reimbursement of benefits paid by BCBSND until BCBSND has been fully reimbursed.

SECTION 6
DEFINITIONS

This section defines the terms used in this Benefit Plan. These terms will be capitalized throughout this Benefit Plan when referred to in the context defined. BCBSND shall determine the interpretation and application of the definitions in each and every situation.

6.1 **ACCIDENT** - an accidental bodily injury or injuries for which Medicare benefits are provided as the direct result of an accident, independent of disease or bodily infirmity or any other cause, while this Benefit Plan is in force. Injuries do not include injuries for which benefits are provided or available under any workers' compensation, employers' liability or similar law, or motor vehicle no-fault plan, unless prohibited by law.

6.2 **ADMISSION** - entry into a facility as a registered inpatient for treatment and care when ordered by a Health Care Provider.

6.3 **BCBSND** - Blue Cross Blue Shield of North Dakota, a legal trade name of Noridian Mutual Insurance Company.

6.4 **BENEFIT PERIOD** - a Benefit Period begins the first day a Subscriber enters a Hospital or Skilled Nursing Facility as a Medicare patient and ends 60 consecutive days after a Subscriber is discharged from the Hospital or Skilled Nursing Facility. A new Benefit Period begins when 60 days without a Hospital or Skilled Nursing Facility stay have elapsed.

6.5 **BENEFIT PLAN** - the agreement with BCBSND, including the Subscriber's membership application, Identification Card, this Benefit Plan, the benefit plan attachment and any supplements, endorsements, attachments, addenda or amendments.

6.6 **CALENDAR YEAR** - the period starting with the Subscriber's Effective Date and ending on December 31 of that year. Each Calendar Year shall start on January 1 and end on December 31 of that year.

6.7 **COST SHARING AMOUNTS** - the portion of Medicare Eligible Expenses not covered by Medicare.

A. **Medicare Coinsurance Amount** - a part of the charge for Your Hospital or medical care that Medicare does not pay, expressed as a percentage of the allowance for the Medicare Eligible Expense.

B. **Medicare Copayment Amount** - a predetermined dollar amount established by Medicare under a prospective payment system for some outpatient Hospital services.

C. **Medicare Deductible Amount** - a specified dollar amount of Medicare Eligible Expenses that You are responsible for before Medicare will begin making payments for covered services.

6.8 **EFFECTIVE DATE** - the date the Subscriber's coverage under this Benefit Plan begins.

6.9 **GROUP** - the Plan Sponsor that has signed an agreement with BCBSND to provide health care benefits for Subscribers.

6.10 **HEALTH CARE PROVIDER** - a Doctor of Medicine (M.D.), a Doctor of Osteopathy (D.O.) or a Board Eligible Oral Surgeon (D.D.S.), who is licensed and registered under the laws of the state in which the services are provided. To qualify under this Benefit Plan, the Health Care Provider must also be classified as eligible under Medicare.

6.11 **HOSPITAL** - an institution, licensed and operated in accordance with state law, that is engaged in providing inpatient and outpatient diagnostic and therapeutic services for the diagnosis, treatment and care of sick and injured persons by or under the direct supervision of Health Care Providers.

6.12 **IDENTIFICATION CARD** - a card issued in the Subscriber's name identifying the Benefit Plan number.

6.13 **LIFETIME RESERVE DAYS** - an additional 60 days of Medicare Eligible Expenses for Hospital care You may use once in a lifetime. These days are not renewable.

6.14 **MEDICALLY NECESSARY** - services, supplies or treatments provided by a Health Care Provider to treat an illness or injury that satisfy all the following criteria:

A. The services, supplies or treatments are medically required and appropriate for the diagnosis and treatment of the Subscriber's illness or injury;

B. The services, supplies or treatments are consistent with professionally recognized standards of health care; and

C. The services, supplies or treatments do not involve costs that are excessive in comparison with alternative services that would be effective for diagnosis and treatment of the Subscriber's illness or injury.

6.15 **MEDICARE** - the programs established by Title I, Part I of Public Laws 89-97 as enacted by the Congress of the United States of America and any later amendments of the laws (known as the Health Insurance for the Aged Act).

6.16 **MEDICARE ELIGIBLE EXPENSES** - those health care expenses that are covered services under Part A or Part B of Medicare that are recognized as reasonable and Medically Necessary by Medicare.

6.17 **MEDICARE PART A** - the part of Medicare insurance that includes Hospital inpatient, Skilled Nursing Facility and home health care benefits. It is sometimes referred to as Medicare Hospital insurance.

6.18 **MEDICARE PART B** - the part of Medicare insurance that includes Health Care Provider's services, outpatient Hospital care, home health care and many other health services and supplies not covered by Medicare Hospital insurance.

6.19 **PLAN ADMINISTRATOR** - North Dakota Public Employees Retirement System (NDPERS).

6.20 **PROTECTED HEALTH INFORMATION (PHI)** - individually identifiable health information, including summary and statistical information, collected from You or on Your behalf that is transmitted by or maintained in electronic media, or transmitted or maintained in any other form or medium and that:

A. is created by or received from a Health Care Provider, health care employer, or health care clearinghouse;
B. relates to Your past, present or future physical or mental health or condition;
C. relates to the provision of health care to You;
D. relates to the past, present, or future payment for health care to You or on Your behalf; or
E. identifies You or could reasonably be used to identify You.

Educational records and employment records are not considered PHI under federal law.

6.21 **QUALIFYING PREVIOUS COVERAGE** - with respect to an individual, health benefits or coverage provided under any of the following:

A. A group health benefit plan;
B. A health benefit plan;
C. Medicare Part A or Part B;
D. Medicaid, other than coverage consisting solely of benefits under a program for distribution of pediatric vaccines;
E. TRICARE (the health care program for military dependents and retirees);
F. A medical care program of the Indian Health Service or of a tribal organization;
G. A state health benefit risk pool, including coverage issued under N.D. Cent. Code §26.1-08;
H. A Federal Employees Health Benefits Program;
I. A public health plan as defined in federal regulations; and
J. A health benefit plan under §5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)].

Qualifying Previous Coverage must be continuous until at least 63 days prior to the Subscriber's Effective Date under this Benefit Plan.

6.22 **SICKNESS** - an illness or disease of a Subscriber that first manifests itself after the Effective Date of this Benefit Plan while this Benefit Plan was in force. This does not include sickness or disease for which benefits are available under any workers' compensation, occupational disease, employers' liability or similar law.

6.23 **SKILLED NURSING FACILITY** - a nursing facility with the staff and equipment to give skilled nursing care and/or skilled rehabilitation services and other related health services.

6.24 **SUBSCRIBER** - You, the individual whose application for coverage has been appropriately submitted.

6.25 **UNITED STATES** - all 50 states, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, the Northern Mariana Islands, and for purposes of services provided on board ship, the territorial waters adjoining the land areas of the United States.

6.26 **YOU AND YOUR** - also referred to as the Subscriber.

NDPERS SPD CHANGES			
Page/Section	**Comments**	**Deletion/Changes**	
Changes Requested by NDPERS to go into the SPD			
All pages with reference or Language referencing EPO and all EPO benefits	Approved by the Governor and Legislature	Remove all EPO language and all EPO benefit information.	
Pg. 9 Outpatient Nutrition Care Services	Funded & approved by the Governor and Legislature	Obesity - Maximum Benefit Allowance of 1 Office Visit per Member per Benefit Period. **Charge to NDPERS $.72**	
Pg. 10 Wellness Services-Well Child Care to the Members 6th birthday	Funded & approved by the Governor and Legislature	Will be changing from 80% of Allowed Charge for PPO and 75% of Allowed Charge for Basic to applying $25 PPO/$30 Basic Copayment Amount per Office Visit, then 100% of Allowed Charge. Deductible Amount waived. S**avings to NDPERS $1.26**	
Pg.10 Wellness Services - Well Child Care Visit Maximum	Funded & approved by the Governor and Legislature	Increased the visit maximum from 5 to 7 visits for Members from birth through 12 months. **Charge to NDPERS $.15**	

Pg.10 Immunizations other than Well Child Care	Funded & approved by the Governor and Legislature	100% of Allowed Charge. Deductible Amount is waived. Covered immunizations are those that have been published as policy by the Centers for Disease Control, Including Tetanus, Influenza Virus, Pneumococcal Pneumonia, MMR(Measles-Mumps-Rubella), Varicella (Chicken Pox), Meningococcal Disease and Human Papillomavirus (HPV). Certain age restrictions may apply. **Charge to NDPERS-HPV for ages 19-26 $.45, Zostavax/Zoster for ages 60+ $.14, Tetanus for age 19+ $.22 and Influenza for ages 19+ $.08**	
Pg. 10 Preventive Screening Services for Members age 6 and older	Funded & approved by the Governor and Legislature	Moving from a age specific schedule to : $25 PPO/$30 Basic Plan Copayment Amount per Office Visit, the 100% of Allowed Charge subject to a Maximum Benefit Allowance of $200 per Member per Benefit Period. Deductible Amount is waived. Benefits Include: One routine physical examination per Member per Benefit Period, Routine diagnostic screenings, Routine screening procedures for cancer. Benefits beyond the Maximum Benefit Allowance will be subject to Cost Sharing Amounts. **Charge to NDPERS $5.84**	

Pg. 10 Fecal Occult Blood Testing for Colorectal Cancer Screening	Funded & approved by the Governor and Legislature	100% of Allowed Charge. Deductible Amount is waived. Benefits are available for Members age 50 and older, subject to a Maximum Benefit Allowance of 1 test per Benefit Period.	
Pg.11 Related Office Visit for Pap Smear	Funded & approved by the Governor and Legislature	The Office Visit related to the Pap Smear will now have a $25 PPO/$30 Basic Plan Copayment Amount for the Office Visit, then 100% of allowed Charge. Deductible Amount is waived.	
Pg. 12 Outpatient Therapy Services and Chiropractic Services	Funded & approved by the Governor and Legislature	Change PT, OT, ST from deductible then coinsurance to $20 PPO/$25 Basic Plan Copayment then 80% PPO/75% Basic Plan coinsurance. Deductible Amount is waived. S**avings to NDPERS $1.32**	
Pg. 13 Chiropractic Services	Funded & approved by the Governor and Legislature	When a Chiropractic Office Visit and Manipulation are billed on the same day by the same provider, one Copayment will now apply instead of two. **Charge to NDPERS $.30**	
Pg. 16 Outpatient Prescription Medications or Drugs and Diabetes Supplies	Funded & approved by the Governor and Legislature	Will now apply Copayments as follows: One Copayment Amount per Prescription Order of refill for a 1 - 34 day supply. Two Copayment Amounts per Prescriptions Order or refill for a 35 - 100 day supply. S**avings to NDPERS $1.64**	

Pg. 46 Section 4 Exclusions	Approved by the Governor and Legislature	Remove the Exclusion for no cverage for Routine Circumcisions. NDPERS will now allow Routine Circumcisions. **No charge to NDPERS**	
Issues Requested by NDPERS			
Pg. 70 8.22 Eligible Dependant	NDPERS wondered if something should be added for Stepchildren. Stepchildren to the Subscriber can't be added to the Subscribers policy unless the actual parent to that stepchild is also added to the policy.	BCBSND feels the language in the book supports this situation regarding eligibility.	
Legislative Issues			
Pg.32 Section 4 Exclusions	Approved by the Governor and Legislature	Loss caused or contributed by a Member's commision or attempted commission of a felony (except losses caused or contributed by an act of domestic violence or any health condition) or a Member's involvment in an illegal occupation following the Member's enrollment in this Benefit Plan. **The benefit was changed from "criminal act" to felony. Charge to NDPERS $.14**	

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Public Employees Retirement System
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Memorandum

DATE: **July 8, 2009**

TO: **NDPERS Board**

FROM: **Kathy & Sparb**

SUBJECT: **Tobacco Cessation Program**

At the June meeting, we reported that the Tobacco Cessation Program funding through the Department of Health (DoH) was approved in the amount of $150,000 to continue tobacco prevention activities for state employees for the 2009-11 biennium. In order to continue our current program, it is necessary to submit a grant application to the DoH. The project would again be a joint effort among PERS, BCBS, and the DoH.

Included for your information is the grant request proposal and supporting documentation to apply for the available grant funds. Staff recommends that we continue our efforts to promote tobacco cessation for state employees. From July 1, 2007 through March 2009, a total of 226 members enrolled in a cessation program. Reimbursements to participants to cover counseling, office visits, and Rx and over the counter medications totaled $92,206. A recap of the program participation and expenses for the current as well as previous bienniums is included for your information.

Board Action Requested

Approve the continuation of the tobacco cessation program for the 2009-11 biennium.

NDPERS TOBACCO CESSATION PROGRAM FOR STATE EMPLOYEES

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Source of Funding:

Section 23-38 of the NDCC relating to the community health grant program, to provide for an appropriation to the State Department of Health, $150,000 or so much of the sum as may be necessary for the purpose of funding employee tobacco education and cessation programs for state employees for the biennium beginning July 1, 2009 and ending June 30, 2011.

Program Sponsor and Administration:

NDPERS is proposing to sponsor a tobacco cessation program for its state employee members with BCBS being the plan administrator and fiscal agent for the grant.

About NDPERS:

Based on its responsibilities related to management of the group health plan and the Board's objectives for monitoring and containing rising health care costs, NDPERS was selected as the plan sponsor for a tobacco cessation program for state employees.

NDPERS is a state agency responsible for the management and administration of the group employee benefit programs for state employees. The North Dakota Public Employees Retirement Board is the governing authority of NDPERS. One of the programs under its authority is the group health insurance plan. The Board supports wellness initiatives that may have a positive impact on containing rising health care costs. To further this objective, the Board submitted legislation during the 2003 session in SB 2060 that related to establishing an employer based wellness program that would provide an incentive for employers to establish these programs in order to involve them as a mechanism to encourage employees to develop and maintain healthy lifestyle habits.

Smoking is the single most preventable cause of disease, disability, and death in the United States. Given the documented medical evidence related to the adverse health effects related to nicotine dependence, and the expense for treatment of this disease, implementing a program to assist individuals to quit could improve the overall health of these individuals and, thus contain rising health care costs both from a short and long-term perspective. Therefore, supporting a cessation program aligns with the Board's objectives.

About BCBS:

BCBS is a nonprofit health care Corporation established pursuant to North Dakota state law. BCBS is the insurance company that PERS is contracted with on a fully insured basis to provide medical and hospital benefit coverage to its members. PERS and BCBS have been under the existing arrangement since 1989. Before that BCBS provided services to PERS on a self-insured basis.

Time Frame:

The NDPERS State Employee Tobacco Cessation Program is scheduled to begin July 1, 2009 and will be completed by June 30, 2011. Final invoice for services will be submitted to the Department of Health by July 15, 2011.

Estimated number of state employees this program will serve:

The program will be available to state employees and their eligible family members that are at least 18 years of age. Attached as Exhibit 1, is a breakdown by county of all health plan members that are age 18 or older. It includes an estimate of the total number of smokers and smokeless users in our group which is further refined to project the potential number of users that will access services through the cessation program. The estimated number of individuals that may qualify for the program is 10,817. Of this

number, 5% or 541 individuals are expected to enroll in the program. The following outlines the methodology used to arrive at this figure:

Total members (29,233) X 22% (number of smokers) X 5% =		322
Total members X 15% (number of smokeless users) X 5% =	+	219
Projected number of individuals expected to enroll in the program =		541

Included as Exhibits 2, 3, and 4 are statewide maps that show by county the total active employee contracts, the total health plan members age 18 or older, and estimated tobacco cessation participants expected to enroll in a program.

Program Description:

Providers for tobacco cessation services will participate based upon a contract between BCBS and the provider.

The member is eligible for four separate benefit periods as follows:

7/1/2009 – 12/31/2009
1/1/2010 – 6/30/2010
7/1/2010 – 12/31/2010
1/1/2011 – 6/30/2011

The program will be a combination of counseling to include initial assessment, physician office visit, nicotine replacement therapy and prescription medication, if indicated, and follow-up support counseling as necessary by individual, group, or telephone. Follow-up must be conducted at 3, 6, 9, and 12 months after "quit date." Local cessation programs will be strongly encouraged to develop incentives to complete counseling.

Re-treatment will be available within six months and will be the responsibility of the counseling program and reimbursement will be available on the same basis as during the initial treatment phase.

Program Services & Reimbursement:

Program services will be reimbursed as follows:

- $200.00 per Member/ per Benefit Period for counseling services, if the provider charges for these services.
- $500 per Member/ per Benefit Period for office visit, prescription drugs and over-the-counter drugs prescribed for tobacco cessation.
- Total expenses reimbursed per Member/per Benefit Period shall not exceed $700 per Benefit period.

Funds will be allocated on a first come first serve basis until all available funds are exhausted.

In addition, the cessation program will be responsible for the following to Blue Cross Blue Shield of North Dakota:

- Reporting admission and follow-up to BCBSND as well as medication recommendations and prescriptions.
- Reporting the number of counseling sessions and whether they are group or individual.
- Reporting outgoing phone call results as well as any phone counseling sessions.
- Arrange for physician office visit, if necessary, and collect receipts.
- Reporting prescriptions and receipts collected.
- Reporting over-the-counter recommendations and receipts collected.
- Producing and submitting a monthly paper roster bill to BCBSND.
- Submitting encounter and follow-up data monthly to BCBSND.
- Verify participant eligibility through BCBSND.
- Disburse reimbursement funds for nicotine replacement therapy, prescription drugs, and physician visits based on receipts from the member.

Monitoring and Evaluation:
BCBSND will produce the following reports:

- Track each patient receiving therapy and level of therapy based on data received from the DoH database.
- Report quit rates by counseling program at 6 and 12 months.
- Report every six months to the PERS and DoH about results and participation rates.

Administration, Promotion & Budget:

Administration

All funds will be billed by and paid directly to BCBS. BCBS will be the contracting entity and will maintain all documentation relating to the projects costs. While PERS will sponsor the program it will not be charging any fees to the project nor will it be administering the funds for the program. As a result of the responsibilities assigned to BCBS they will be charging an administrative fee for the project of 10% of claims paid to providers to pay its costs as program administrator and granting entity. BCBS will reimburse providers monthly based upon the paper billings submitted. BCBS will then submit to the Department of Health monthly the total claims for reimbursement. Final billing will be submitted no later than July 15, 2011.

Promotion

BCBSND will provide two postcard mailings (Introductory Postcard and Last Chance to Enroll Postcard). Payment of $4,900 will be made to BCBSND after each mailing (total of $9,800).

Budget

As noted above under "Program Services" each participant is eligible for a maximum benefit under this program of $700 for each 6-month period. Also as noted above and in the attached there could be up to 541 people who could enroll in the program. Therefore, the potential costs of the program could be:

541 * $700 = $378,700

Services will be provided on a first come first serve basis contingent on available funding. We are requesting $127,455 for the program services. In addition BCBS administrative fees will be approximately $12,745 based upon this service level. Therefore, the total amount requested is:

Program Benefit Budget:	$127,455
BCBS Administrative Costs (10%)	12,745
DoH (Postcard mailing)	9,800
Total Budget Request	$150,000

Reimbursement will be made to BCBS monthly based on actual costs accrued by local programs for services provided to state employees plus a 10% administrative fee up to a maximum of $150,000 (July 1, 2009 through June 30, 2011).

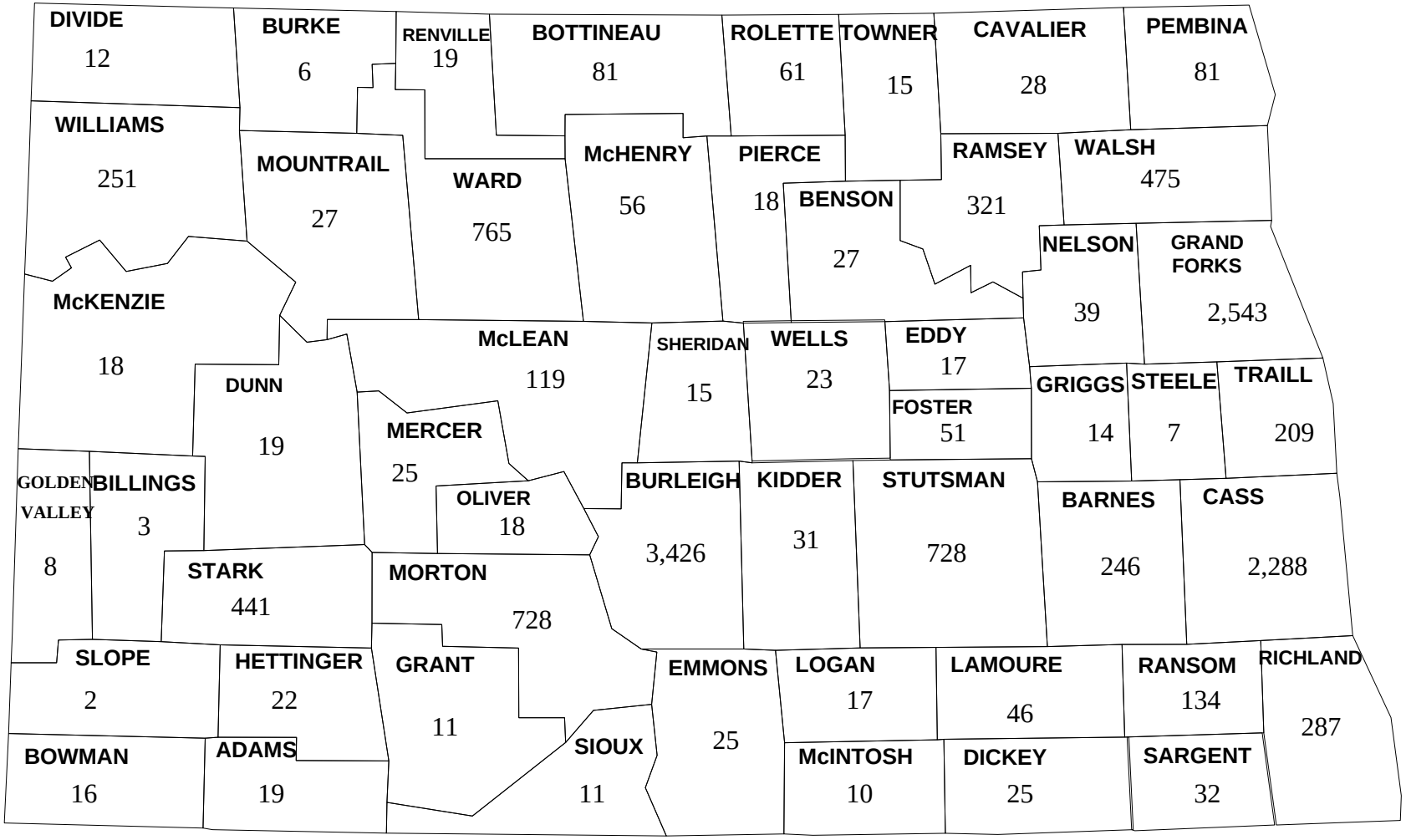
NDPERS ACTIVE STATE HEALTH PLAN MEMBERS AGE 18+ - APRIL 2009 **EXHIBIT 1**

COUNTY	ACTIVE EMPLOYEES	MEMBERS	SMOKERS	SMOKELESS USERS	TOTAL	PROGRAM USERS
			22%	15%		5%
01 ADAMS	19	45	10	7	17	1
02 BARNES	246	499	110	75	185	9
03 BENSON	27	58	13	9	21	1
04 BILLINGS	3	5	1	1	2	0
05 BOTTINEAU	81	155	34	23	57	3
06 BOWMAN	16	33	7	5	12	1
07 BURKE	6	10	2	2	4	0
08 BURLEIGH	3426	6708	1,476	1,006	2,482	124
09 CASS	2288	4287	943	643	1,586	79
10 CAVALIER	28	63	14	9	23	1
11 DICKEY	25	49	11	7	18	1
12 DIVIDE	12	29	6	4	11	1
13 DUNN	19	39	9	6	14	1
14 EDDY	17	34	7	5	13	1
15 EMMONS	25	51	11	8	19	1
16 FOSTER	51	117	26	18	43	2
17 GOLDEN VALLEY	8	13	3	2	5	0
18 GRAND FORKS	2543	4824	1,061	724	1,785	89
19 GRANT	11	20	4	3	7	0
20 GRIGGS	14	35	8	5	13	1
21 HETTINGER	22	46	10	7	17	1
22 KIDDER	31	62	14	9	23	1
23 LAMOURE	46	100	22	15	37	2
24 LOGAN	17	31	7	5	11	1
25 MCHENRY	56	114	25	17	42	2
26 MCINTOSH	10	20	4	3	7	0
27 MCKENZIE	18	37	8	6	14	1
28 MCLEAN	119	233	51	35	86	4
29 MERCER	25	48	11	7	18	1
30 MORTON	728	1519	334	228	562	28
31 MOUNTRAIL	27	55	12	8	20	1
32 NELSON	39	80	18	12	30	1
33 OLIVER	18	36	8	5	13	1
34 PEMBINA	81	170	37	26	63	3
35 PIERCE	18	43	9	6	16	1
36 RAMSEY	321	643	141	96	238	12
37 RANSOM	134	269	59	40	100	5
38 RENVILLE	19	47	10	7	17	1
39 RICHLAND	287	581	128	87	215	11
40 ROLETTE	61	126	28	19	47	2
41 SARGENT	32	72	16	11	27	1
42 SHERIDAN	15	29	6	4	11	1
43 SIOUX	11	27	6	4	10	0
44 SLOPE	2	3	1	0	1	0
45 STARK	441	888	195	133	329	16
46 STEELE	7	13	3	2	5	0
47 STUTSMAN	728	1371	302	206	507	25
48 TOWNER	15	34	7	5	13	1
49 TRAIL	209	446	98	67	165	8
50 WALSH	475	917	202	138	339	17
51 WARD	765	1492	328	224	552	28
52 WELLS	23	48	11	7	18	1
53 WILLIAMS	251	497	109	75	184	9
99 OUT OF STATE	981	2062	454	309	763	38
TOTAL:	14,897	29,233	6,431	4,385	10,817	541

NDPERS State Active Employees

Exhibit 2

April 2009

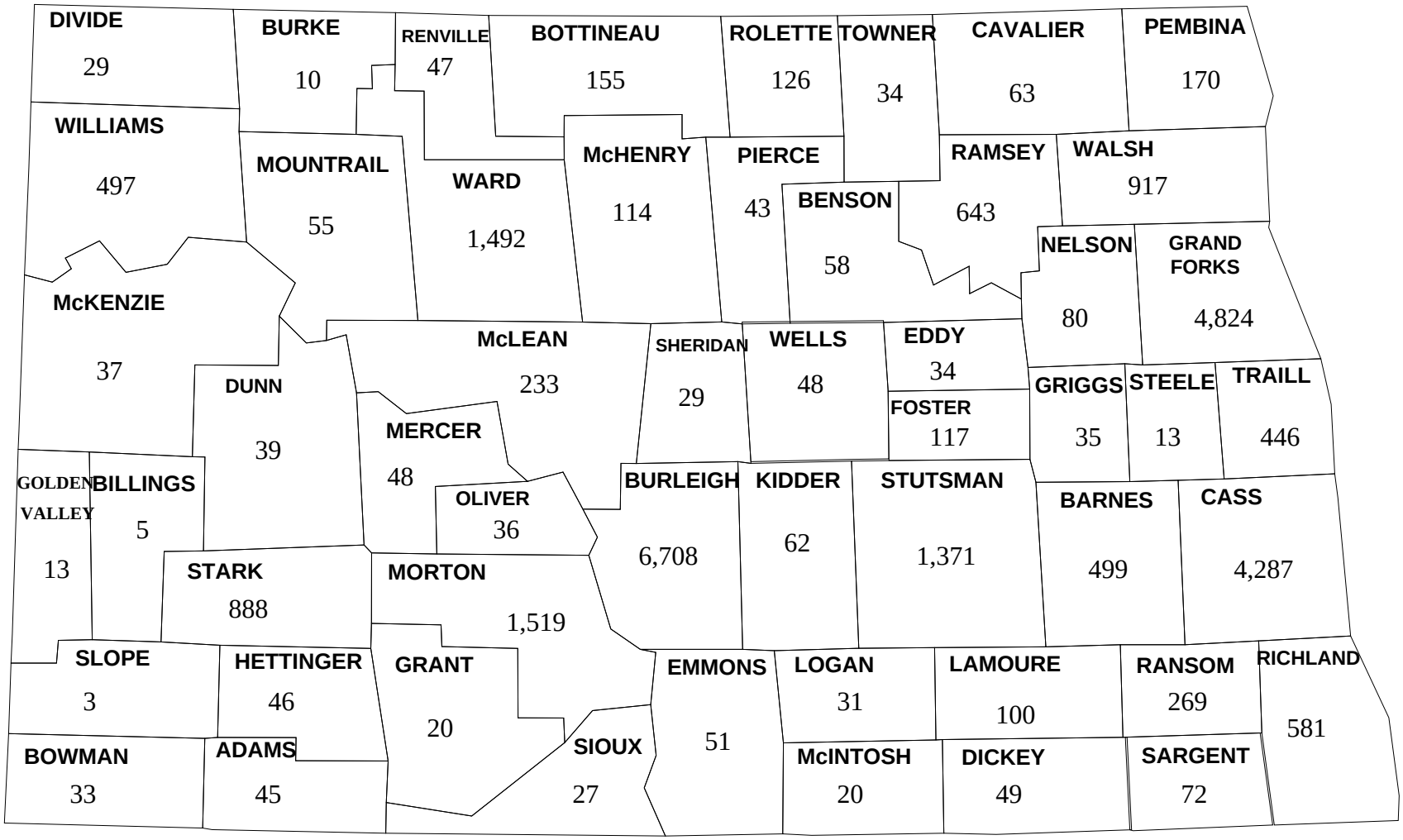


Out-of-State – 981

Total – 14,897

NDPERS State Active Health Plan Members Age 18+ **Exhibit 3**

April 2009



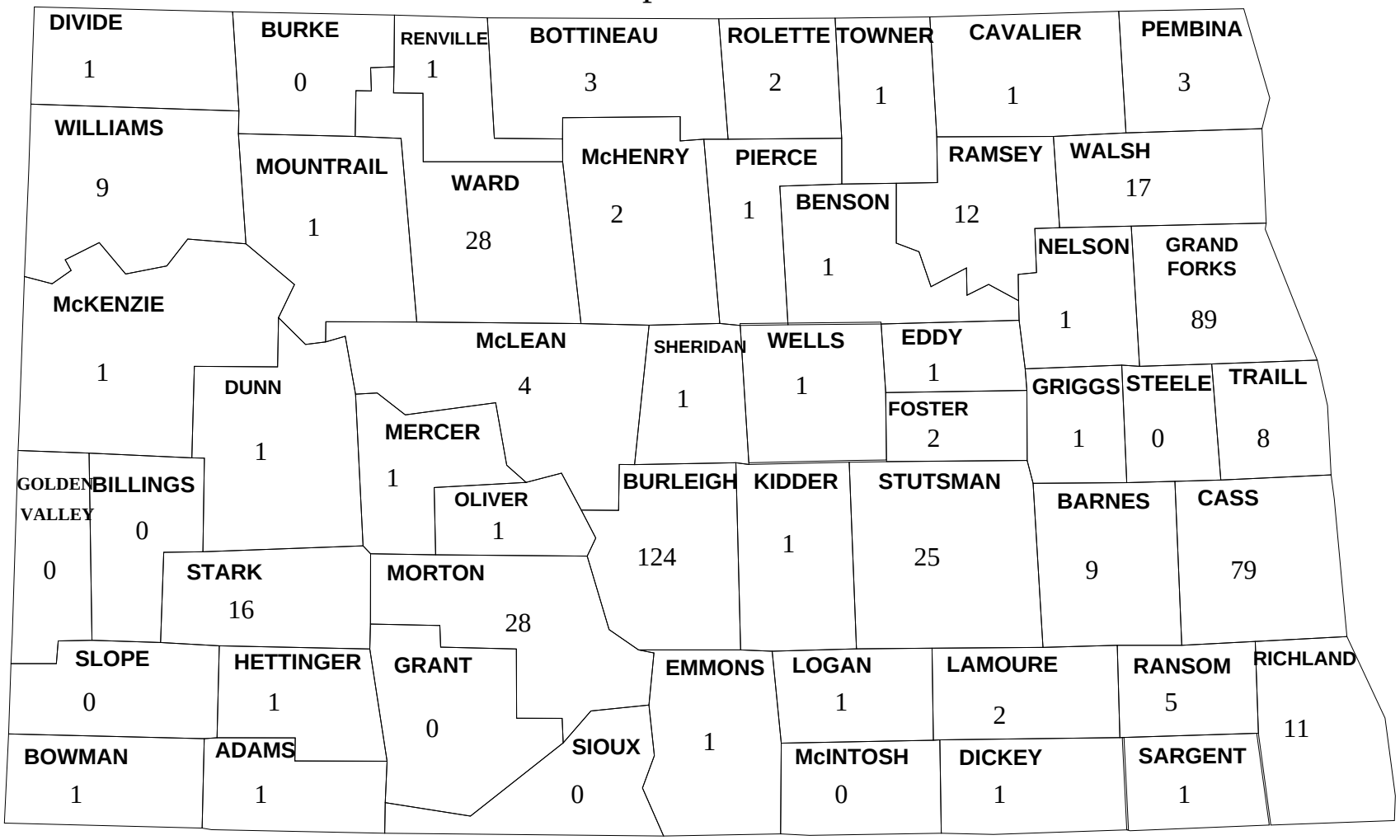
Out-of-State – 2,062

Total – 29,233

NDPERS State Active Health Plan Members Age 18+ Estimated Tobacco Cessation Participants

Exhibit 4

April 2009



Out-of-State – 38

Total – 541

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NDPERS Tobacco Program Update: April 2009

Mandi-Leigh Schonteich – Heath Care Data Analyst – Medical Management Department, BCBSND

All current data received since the start of the third Biennium (July 1, 2007) through March 31, 2009 (end of reporting period: March 2009) were included for the current update regarding the NDPERS Tobacco Cessation Program. As seen in Table 1 (below) a total of 1,008 start dates with 955 unique members have been identified as beginning a cessation program since the first Biennium (July 2003) through the end of the reporting period of March 2009.

Table 1. Number of Members, Start Dates, and Dollars for Each Biennium

	Start Dates	Members	Total Dollars Paid	Average Dollars per Member
First Biennium (07/01/03 - 06/30/05)	329	308	$35,302	$115
Second Biennium (07/01/05 - 06/30/07)	453	433	$92,696	$214
Third Biennium - Current (07/01/07 - 03/31/09)	226	214	$92,206	$431
Total	*1,008*	*955*	*$220,204*	*$231*
Promotional Cost			$20,000	
***Total* (with Promotional Cost)**	*1,008*	*955*	*$240,204*	*$252*

All biennium had a total cost of $220,204. With promotion costs of $20,000, the grand total cost was found to be $240,204. Calculating the number of members (n=955) receiving the program since the *first Biennium start (07/01/03)* and the total member expenses since this date ($220,204), the average cost for the program equaled $231 per participant, or $3.39 per participant/month. Finally, the cost from the *start of the new biennium (07/01/07)* equaled $3.73 per NDPERS employee (n=24,718) or eighteen cents per employee/month.

* Expense data were received from the Finance Department at BCBSND.

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Memorandum

TO: PERS Board

FROM: Sparb

DATE: July 9, 2009

SUBJECT: Wellness Efforts Update

At the May meeting we heard the final report from UND on the pilot wellness program. The result of that study was the four pilot sites had lower overall health costs than our control group. The conclusion was effective employer-based programs help to reduce costs. In recognition of this and the pilot, we have drawn out the following lessons learned relating to the success in the pilot agencies:

1. Support from top management
2. Incentives
3. Agency wellness committees and process
4. Technical assistance and support

In our negotiations with BCBS concerning the health plan renewal and our adoption of their wellness program we have addressed #2.

Concerning #3 and #4 we know these are interrelated. That is agency based wellness processes and committees were established in part, due to the support of UND. We also know that the technical support helped to keep the committees and processes on track during the 36 month pilot. We have also identified this as an area that we do not presently

provide support in our existing program. To this end PERS staff has started discussions with BCBS about how we can address this and we will be developing a proposal for your consideration by this fall.

Concerning item #1 we know that our existing wellness program process does require management to sign up for the 1% discount and designate a coordinator. However, the pilot program points to the need to get management even more involved to make the program successful. Here again staff will be working on concepts relating to this for your consideration this fall as well.

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Memorandum

TO: **PERS Board**

FROM: **Rebecca**

DATE: **July 7, 2009**

SUBJECT: **Employer Based Wellness Program Renewal**

PERS staff has completed the renewal of the Employer Based Wellness Program for the plan year July 1, 2009 to June 30, 2010. This renewal determines those employers that will qualify for the 1% health insurance premium discount during the plan year.

At this time, there are a total of 187 out of 281 employers electing to participate in the wellness program. This is an employer participation rate of approximately 67%. However, 97% of employees covered on the insurance plan are working for employers that are offering wellness programs and activities to their employees.

The break-down of the participating employers is as follows:

- 95 state agencies, universities and district health units
- 35 counties
- 22 schools
- 17 cities
- 18 political subdivisions

This item is informational only. Staff will be available at the Board meeting to answer any questions that you may have regarding the wellness program renewal process.

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M E M O R A N D U M

TO: NDPERS BOARD
SPARB COLLINS, NDPERS

BTR

FROM: BRYAN T. REINHARDT

DATE: June 23, 2009

SUBJECT: GROUP MEDICAL PLAN - SURPLUS/AFFORDABILITY UPDATE

Here is the May surplus projection and affordability analysis for the NDPERS group medical plan. The plan made it through the 2005-2007 biennium and is in the last quarter of the 2007-2009 biennium.

Net premium sent to BCBS in July 2007 was $13,406,858. In July 2005 it was $10,853,370. There are now 25,161 contracts on the NDPERS Health Plan, covering 56,000 people. The NDPERS health plan ended up with 23,580 contracts in June, 2005. There were 22,947 contracts in June, 2003, and 21,792 in July 2001.

The 2003 - 2005 biennium settlement is on account at BCBS with a balance of over $2,051,000. The remaining $14.3 million was used to buy down premiums for the 05-07 biennium. This amount is at BCBS and receiving interest.

The first settlement for the 2005 - 2007 biennium transferred $3,672,932 to the NDPERS account. In addition refunds came in greater than IBNR claims, so this biennium has a cash balance of $369,737. The final settlement for this biennium is June 2009.

The projection for the 2007 - 2009 biennium shows total surplus at -$4.4 million. If there is a surplus, we share 50/50 in the first $3.0 million surplus with BCBS. This will make future growth in the gain for NDPERS difficult. The plan is fully insured by BCBS, so the June 30, 2009 NDPERS estimated gain is $0. IBNR for this estimate is at $17.5 million and cash to pay claims is at $13.8 million. $13.6 million was paid out in May.

If you have any questions or you should need anymore information, please contact me.

NDPERS - ESTIMATED SURPLUS PROJECTION: 2007-2009 BIENNIUM

May, 2009

The following exhibit summarizes the estimated surplus for the NDPERS group medical plan at the end of the 2007-2009 biennium. The estimate has been updated to include account activity through May, 2009.

1) Preliminary Underwriting Gain/Loss for the 2007-2009 Biennium		($4,686,600)
2) Wellness Program Expenses		$0
3) Estimated Underwriting Gain/Loss for the 2007-2009 Biennium		($4,686,600)
4) Projected Interest Accumulation (adjusted for usage as premium)		$0
5) Refunds and Settlements		
11/30/07 Perform Rebate	(Included as claim rebates)	$340,034
02/29/08 Perform Rebate	(Included as claim rebates)	$385,151
05/31/08 Perform Rebate	(Included as claim rebates)	$328,973
08/31/08 Perform Rebate	(Included as claim rebates)	$354,915
11/31/08 Perform Rebate	(Included as claim rebates)	$395,601
02/28/09 Perform Rebate	(Included as claim rebates)	$270,464
05/31/09 Perform Rebate	(Included as claim rebates)	$288,926
06/30/09 Perform Rebate		$300,000
EPO Settlement Payments 7/07 - 6/08	(No target settlements)	$0
6) Total Estimated Surplus Held by BCBS		($4,386,600)
7) BCBS Portion of Surplus (Half upto $1,500,000)		$0
8) PERS Portion of Surplus Held by BCBS		($4,386,600)
9) Cash Reserve Account Balance		$0
Future Contributions:		$0
Future Interest:		$0
Total		$0
10) NDPERS Wellness Accounts		
My Health Connection		$212,823
Employer Based Wellness		$0
Wellness Benefit Program		$2,329
SubTotal		$215,152
Total Adjusted for Usage		$0
11) Total Estimated Funds Available to PERS on June 30, 2009		$0

NDPERS - Projected Underwritten Experience for the 2007-2009 Biennium
May, 2009

MONTH	PREMIUM COLLECTED	PREMIUM ADJUSTMENT	TOTAL PREMIUM INCOME	ADMIN EXPENSE $29.90/Con	NET PREMIUM	INTEREST ON CASH	CLAIMS INCURRED & PAID TO DATE	ESTIMATED IBNR CLAIMS	TOTAL INCURRED CLAIMS(1)	ESTIMATED GAIN / LOSS
Jul-07	$13,406,857	$0	$13,406,857	$725,404	$12,681,453	$0	$11,184,347	$0	$11,184,347	$1,497,106
Aug-07	$13,465,027	$308	$13,465,336	$728,334	$12,737,002	$8,720	$12,180,867	$0	$12,180,867	$564,855
Sep-07	$13,608,834	$6,878	$13,615,713	$736,018	$12,879,695	$32,149	$10,959,079	$0	$10,959,079	$1,952,765
Oct-07	$13,577,219	$7,321	$13,584,540	$734,822	$12,849,718	$44,159	$13,063,891	$0	$13,063,891	($170,014)
Nov-07	$13,584,631	($6,547)	$13,578,084	$735,480	$12,842,604	$38,392	$13,279,495	$0	$13,279,495	($398,499)
Dec-07	$13,568,728	$5,601	$13,574,329	$734,553	$12,839,776	$40,841	$12,531,817	$0	$12,531,817	$348,800
Jan-08	$13,582,515	$3,071	$13,585,586	$735,121	$12,850,465	$39,733	$13,724,701	$0	$13,724,701	($834,503)
Feb-08	$13,622,093	$1,733	$13,623,826	$737,155	$12,886,671	$33,024	$12,264,107	$0	$12,264,107	$655,588
Mar-08	$13,620,486	($2,685)	$13,617,801	$737,125	$12,880,676	$25,258	$13,276,725	$0	$13,276,725	($370,791)
Apr-08	$13,626,826	$1,915	$13,628,741	$738,171	$12,890,570	$21,216	$13,291,000	$0	$13,291,000	($379,214)
May-08	$13,623,071	$1,798	$13,624,869	$737,992	$12,886,877	$17,341	$12,667,367	$0	$12,667,367	$236,851
Jun-08	$13,644,570	($2,237)	$13,642,333	$739,128	$12,903,205	$27,130	$12,838,658	$0	$12,838,658	$91,677
Jul-08	$13,611,228	($4,554)	$13,606,675	$737,693	$12,868,982	$33,409	$13,870,141	$0	$13,870,141	($967,751)
Aug-08	$13,622,766	$25,091	$13,647,857	$738,052	$12,909,805	$29,181	$12,992,721	$0	$12,992,721	($53,735)
Sep-08	$13,750,651	$3,180	$13,753,831	$745,168	$13,008,663	$29,890	$13,090,569	$30,000	$13,120,569	($82,016)
Oct-08	$13,718,593	$26,952	$13,745,546	$744,480	$13,001,065	$21,426	$13,496,917	$280,000	$13,776,917	($754,425)
Nov-08	$13,728,459	$9,639	$13,738,098	$745,497	$12,992,601	$19,221	$12,369,678	$290,000	$12,659,678	$352,145
Dec-08	$13,733,851	$566	$13,734,417	$745,557	$12,988,860	$13,638	$15,362,642	$400,000	$15,762,642	($2,760,143)
Jan-09	$13,810,474	($5,691)	$13,804,783	$749,862	$13,054,921	$9,258	$12,020,869	$550,000	$12,570,869	$493,310
Feb-09	$13,811,340	($5,048)	$13,806,292	$749,952	$13,056,340	$6,142	$11,356,025	$1,000,000	$12,356,025	$706,458
Mar-09	$13,815,272	($6,974)	$13,808,298	$749,892	$13,058,406	$7,663	$12,810,261	$1,700,000	$14,510,261	($1,444,192)
Apr-09	$13,843,570	($6,718)	$13,836,852	$751,417	$13,085,435	$7,498	$11,655,509	$4,350,000	$16,005,509	($2,912,575)
May-09	$13,823,863	$30,694	$13,854,557	$751,327	$13,103,229	$7,229	$3,666,130	$8,900,000	$12,566,130	$544,328
Jun-09	$13,823,863	$0	$13,823,863	$752,314	$13,071,549	$8,198	$0	$0	$14,082,326	($1,002,579)
BIENNIAL TOTAL	$328,024,788	$84,294	$328,109,082	$17,780,512	$310,328,570	$520,717	$283,953,516	$17,500,000	$315,535,842	($4,686,555)

(1) Future Months are Estimated based on Projection from NDPERS.

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Memorandum

TO: **NDPERS Board**

FROM: **Kathy**

DATE: **July 9, 2009**

SUBJECT: **Hardship Withdrawal Guidelines/Education**

Attached is a Guide to Unforeseeable Emergency Withdrawals that was located on the NAGDCA web site. We are bringing this publication to the Board's attention as it is both educational and it provides some new perspectives on the criteria that may be used to evaluate hardship requests. Some areas that are addressed as well as highlighted in the guidelines include:

- Common best practices for designing and administering withdrawal provisions.
- Seven requirements for evaluating the eligibility of unforeseeable emergency requests.
- Standards that may be used as evaluation criteria for administering hardship distributions.
- Examples of events that are generally considered not to be unforeseeable emergencies.
- Types of documentation generally required when applying for a withdrawal request.

Staff Recommendation:

Staff is proposing that it use this document to develop guidelines for evaluation of hardship requests and submit it for the Board's review and approval at a future meeting. We further suggest that after the guidelines have been adopted that they be included as a reference with any future hardship withdrawal applications submitted to the Board for evaluation.

Board Action Requested

Provide staff direction regarding the above recommendation.

Section 457(b) Plan Administrator's Guide to Unforeseeable Emergency Withdrawals

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June 2007

By: Gay Lynn Bath, Deferred Compensation Manger of the Oregon Savings Growth Plan and Roderick Crane, Director of Institutional Business Development for TIAA-CREF Individual & Institutional Services, LLC

Section 457(b) Plans may (but are not required to) offer participants the ability to take an in-service withdrawal in the event of an "unforeseeable emergency." While 457(b) plans typically offer an unforeseeable emergency withdrawal option, most plan sponsors would agree that this feature is one of the most difficult to administer.

Why is unforeseeable emergency administration so difficult?

The source of the difficulty in administering 457(b) unforeseeable emergency provisions lies primarily with the law and related regulations. Unforeseeable emergency withdrawal provisions are difficult to administer because so many of the legal requirements are not well defined.

Regulations under Section 457(b) of the Code define an unforeseeable emergency as a severe financial hardship resulting from:

- an illness or accident,
- the loss of property due to casualty loss (including the need to rebuild a home following damage to a home not otherwise covered by homeowner's insurance, e.g., as a result of a natural disaster), or
- any other similar extraordinary and unforeseeable circumstances arising as a result of events beyond the individual's control.

The IRS has not provided much guidance on the key parts of this definition. In particular, no substantial guidance on what is meant by the terms "severe" or "unforeseeable" has been issued. Plan administrators have been left with what amounts to a subjective facts and circumstances test for adjudicating unforeseeable emergency withdrawal requests.

Many plan administrators have tried to streamline and simplify administration by creating lists of events and expenses that are eligible or ineligible. While helpful, it is also clear that making such lists is an endless proposition because of the myriad of circumstances and situations the participants present when making withdrawal requests.

This Guide is intended to help plan sponsors understand the basic requirements and some best practices for the design and sound administration of this common but difficult to administer 457(b) plan feature.

Does the unforeseeable emergency withdrawal option need to be part of the plan document?

Yes. The 457(b) regulations make it clear that the unforeseeable emergency option must be a written provision in the plan document before it can be offered.

What are some common best practices for designing and administering 457(b) unforeseeable emergency withdrawal provisions?

As with other aspects of plan administration, consistency is important. Realize that plan sponsors set a precedent of sorts with each granted request, and that participants will expect similar treatment from their perspective for their situation. While consistency of administration is not a guarantee that each and every decision will satisfy IRS scrutiny, it is evidence of good faith compliance that may be helpful.

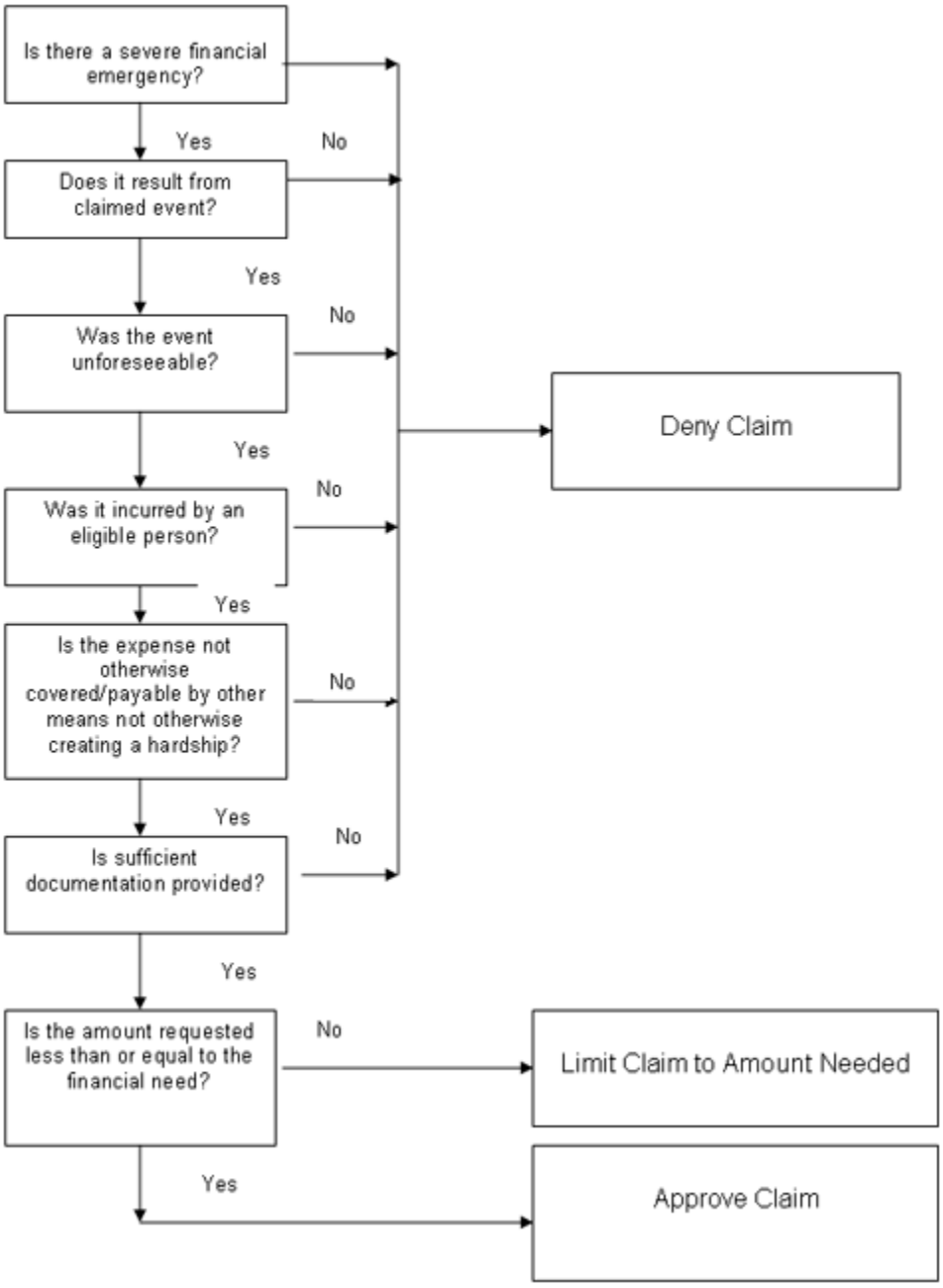
A written policy detailing the established procedures and objective standards for administering unforeseeable emergency withdrawal features is also advisable. Written policies need not (nor could such be expected to) address all the possible circumstances that may arise. However, a written policy that 1) identifies the process to be followed, 2) the standards to be applied and 3) circumstances that clearly qualify or do not qualify as eligible unforeseeable emergencies can help streamline administration.

Having a written unforeseeable emergency withdrawal policy also helps demonstrate good faith compliance to the IRS.

The written policy should be adopted by the plan fiduciaries and should clearly identify responsibilities that have been delegated to committees, staff or to third-party service providers and appeal procedures.

What are the requirements for reviewing unforeseeable emergency requests?

There are seven basic requirements that an individual must meet in order to be eligible for an unforeseeable emergency withdrawal under 457(b). The accompanying flow chart identifies each of these requirements and provides a process that administrators may wish to consider for reviewing unforeseeable emergency requests.



What does severe financial hardship mean?
The 457(b) regulations do not define what constitutes a "severe financial hardship". Because IRS guidance has been limited in this area, administrative practices vary rather widely. Some practices have evolved that may be helpful to plan administrators. One of the clearer and more understandable approaches is to adopt something similar to the "immediate and heavy" standard used for administering the hardship distribution provisions under 401(k) and 403(b) plans. Under this standard, a 457(b) plan participant would have to show that the financial hardship is

- Immediate - The requested withdrawal is needed currently and not at some later date, and

- Heavy - The size of the resulting financial burden must be large enough to create a hardship to the individual. This is a subjective test and will depend on the facts and circumstances of each case. For example, a $1,000 uninsured medical bill for a person with family income of $15,000 per year is more likely be judged to be a heavy financial burden, while it may not be for an individual with family income of $150,000.

Some plan sponsors have used other standards, including requiring the financial hardship to be "catastrophic", "sudden, or "unexpected". These are all permitted under federal law. Regardless of what standard a plan uses to define what a "severe" financial hardship is, it will mean applying a facts and circumstances test.

Does the severe financial hardship have to be directly caused by the unforeseen event?

The 457(b) regulations state that the financial hardship must be the result of the events in question. There has been no further IRS guidance as to how connected the event has to be to the claimed financial hardship. Plan administrators should require, however, that the individual identify the emergency event and explain how the event contributed to the financial hardship. Some causal connection between the event and the financial hardship must be shown.

What does "unforeseeable" mean? The regulations identify the following as events that will be considered unforeseeable:

- Illness
- Accident
- Casualty loss

Illness and accidents are generally understandable and recognizable events. Casualty is not further explained by the IRS, but is commonly understood to include other sudden, unexpected or unusual events, such as fires, storms, lightning, earthquakes and other natural or weather related disasters.

Unfortunately, except for the three events noted above, there really is no easy test or clear standard to determine the existence of an unforeseeable emergency. The 457 regulations state that the existence of an unforeseeable emergency is "to be determined based on the relevant facts and circumstances of each case" - in other words by your interpretation and best judgment. Some questions to ask in every case include:

- Were events beyond the individual’s control?
- Could the situation have been anticipated, avoided or budgeted?

While applicable federal law and related regulations do not identify any formal "reasonableness" standard for determining whether an emergency was unforeseeable, it is clear that the IRS expects unforeseeable emergency withdrawal provisions to be administered under objective standards that are consistently applied. Plan sponsors should establish policies that determine unforeseeability from the perspective of a reasonable and prudent person.

Whose emergency does it have to be?

The illness, loss, or other unforeseeable emergency can be that of:

- the participant
- the participant's spouse
- the participant's dependent for Code Section 152 tax purposes (e.g. a minor child, relative or other individual who lives with the participant full time and receives over half of his or her support from the participant) or
- the participant's beneficiary under the Plan. (The Pension Protection Act of 2006 added this optional category.)

Has the IRS provided any other guidance or examples of what is or may be an unforeseeable emergency?

The IRS has specifically ruled out the elective purchase of a home or college tuition as unforeseeable emergencies. (Note that these two events are probably eligible as "financial hardship" in-service distribution events for a 401(k) or 403(b) plan.)

The IRS has also said that foreclosure or eviction, medical expenses, and funeral payments **may** be, but are not necessarily always, unforeseeable emergencies.

What are some examples of events that are generally considered not to be unforeseeable emergencies?

The following are examples of expenses that, standing on their own, ordinarily would not qualify as a severe financial hardship because there is no unforeseeable emergency involved. These are situations where the individual 1) had significant control or 2) could have reasonably and prudently anticipated, avoided or budgeted for the event.

- Cost of education/tuition
- Normal monthly expenses - e.g., utility bills, mortgage or rent payments
- Payment on credit cards or loans
- Payment of federal, state, local or property taxes
- Elective purchase, maintenance or remodeling of a home or other real estate
- Costs associated with divorce or separation
- Purchase of automobile other transportation expenses
- Automobile or appliance maintenance
- Elective or cosmetic surgery
- Routine medical, dental or orthodontic services
- Bankruptcy
- Legal judgments and legal fees
- Investment losses
- Gambling losses
- Wage garnishment
- Costs of adoption
- Child support payments

It is important to note, however, that where there is a demonstrated unforeseeable emergency, some of these expenses may be considered as a severe financial hardship. For example, if a natural disaster strikes an area and an individual loses their house and their job, they could ask for an unforeseeable emergency distribution. The basis for this unforeseeable emergency distribution would be a loss of income that the participant could use to cover ordinary expenses, including credit card payments. The unforeseeable emergency distribution could not exceed the participant's income loss. An unforeseeable emergency distribution could also be granted in this example to buy a new primary residence. However, the unforeseeable emergency distribution would have to be reduced by any insurance and other benefits the participant receives from other sources related to the housing loss. This illustrates why it is so difficult to develop comprehensive lists of situations and expenses that will be eligible under the unforeseeable emergency rules and why it is so important to develop clear and consistent standards and processes for making decisions in this area.

Does an individual need to use other financial resources first before seeking an unforeseeable emergency withdrawal?

Yes, the regulations provide that the individual should only withdraw assets intended as retirement savings in the Plan as a last resort. To that end, the following requirements must typically be met:

- Insurance coverage is either not available or is insufficient to cover the financial need caused by the unforeseeable emergency.
- The need cannot be satisfied by taking a loan from the Plan, from other plans of the employer, or from commercial lenders.
- The need cannot be met by stopping contributions under the Plan and/or any other plan of the employer with elective deferrals.
- The need wouldn't be satisfied through the liquidation of the participant's assets, as long as the liquidation itself doesn't impose further unreasonable hardship.

What kind of documentation is generally required with an unforeseeable emergency withdrawal request? The decision to grant or deny an unforeseeable emergency withdrawal request must be based on sufficient evidence indicating the emergency is extraordinary and unforeseeable. The participant must file a written request and provide all necessary and requested supporting proof and documentation. (On their website listing of top 403(b)/457(b) compliance issues, the IRS lists inadequate documentation, lack of proper internal controls, and distributions that exceed the amount needed as common violations in unforeseeable emergency withdrawal administration.) While the IRS has not provided guidance as to how much evidence is necessary, it is relatively clear that the mere statement by an applicant without an offer of proof is likely insufficient. Some examples of commonly required documentation include:

- A written explanation of the circumstances giving rise to the withdrawal request
- Explanation of Benefits (EOB) for medical bills.
- Written notice of eviction/foreclosure
- Pay stubs
- Worker's compensation or disability payments
- Bills, receipts, or statements for funeral, repairs to home, attorneys' fees, etc.

- Personal financial statements
- Loan denial letters from commercial lenders
- Foreclosure or eviction notices/documents

Other documentation or proof may be necessary depending on the nature of the emergency event and the financial hardship.

Can adding a plan loan feature decrease the burdens of administering an unforeseeable emergency feature?

Yes. Plan loans can be offered by 457(b) plans and are being increasingly considered as an alternative way for participants to gain access to their accounts when needed. Federal law and regulations allow loan features to be offered without requiring participants to meet the "extraordinary and unforeseeable emergency" standard that is so difficult to administer.

Plan sponsors concerned about making participant retirement savings too available can impose limitations on the availability of plan loans. For example, a plan sponsor could require that plan loans can be made available only for "hardships" permitted for 401(k) and 403(b) plans.

Adding a plan loan feature may lessen the time and effort spent administering unforeseeable emergency withdrawal requests. However, plan loans add their own complexities that should be assessed carefully before being added, including administering loan repayments and defaults.

What taxation and reporting rules apply to unforeseeable emergency distributions?

Unforeseeable emergency withdrawals are taxable to the participant as ordinary income. Under IRS Notice 2003-20, unforeseeable emergency withdrawals are non-periodic payments that are reported on Form 1099R for federal and state income tax purposes. Unforeseeable emergency distributions are not eligible rollover distributions and are subject to withholding under § 3405(b) at a 10-percent rate, unless the recipient elects not to have withholding apply.

Can an unforeseeable emergency withdrawal be paid back?

No. An unforeseeable emergency withdrawal is not a loan. Further, because the participant may not be allowed to contribute for up to 12 months, the participant will likely miss out on the opportunity to make even regular contributions until the plan allows contributions to begin again. However, subject to the regular annual deferral limits, once the participant is again eligible to contribute, additional contributions could be made at that time to make up for the amounts withdrawn.

Does an unforeseeable emergency withdrawal affect the amount that can be deferred in the year of the hardship?

No. A participant may still contribute up to the regular deferral limit for that year. Again, however, because the plan may prohibit participant to make contributions for up to 12 months, the participant most likely will not reach the limit for that year.

Does an unforeseeable emergency withdrawal affect the amount a participant can contribute under the Age 50 or 3-year catch up feature?

No. The unforeseeable emergency withdrawal does not reduce the amount of a participant's Age 50 or 3-year catch-up calculation.

About the Authors:

Gay Lynn Bath

Ms. Bath is the Deferred Compensation Manager for the Oregon Savings Growth Plan in Salem, Oregon. In that capacity, she administers a $1 billion 457 plan for the benefit of state and local government employees in Oregon. Prior to moving to Oregon in 2004, she was the 401(k) Plan Administrator for the Public Retirement System of Idaho (PERSI) for three years. Before working in the public realm, Gay Lynn was a 401(k) Plan Administrator for two years at a technology manufacturing company in Nampa, Idaho.

Roderick Crane

Mr. Crane is a national authority on public sector retirement plans and is responsible for developing and executing strategies for the state and local government 401(a), 457, 401(k) and 403(b) markets for TIAA-CREF. Before joining TIAA-CREF, Mr. Crane was a senior consultant with The Segal Company and Mercer Human Resources Consulting. During this 22-year period, he worked primarily with large state and local governments on the design and administration of their defined benefit and defined contribution retirement programs as well as their deferred compensation and retiree health savings plans. Prior to entering the benefits consulting arena, he served as staff legal counsel for the North Dakota Legislative Assembly and its public employee retirement oversight committee.

Neither NAGDCA, nor its employees or agents, nor its contributing authors, provide tax, financial, accounting or legal advice. This memorandum should not be construed as tax, financial, accounting or legal advice; it is provided solely for informational purposes. NAGDCA members, both government and industry, are urged to consult with their own attorneys and/or tax advisors about the issues addressed herein.

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Memorandum

TO: PERS Board
FROM: Sparb
DATE: July 9, 2009
SUBJECT: Board Committee Assignment

As of June 2009 the PERS Board had several standing committees comprised of the following Board members:

- Investment Committee: Mr. Sandal, Mr. Leingang, Mr. Erdmann and Mr. Trenbeath (alternate)
- Audit Committee: Chairman Strinden and Mr. Leingang
- Benefits Committee: Ms. Ehrhardt, Ms. Smith, and Mr. Trenbeath
- Election Committee: Mr. Strinden, Mr. Leingang, and Mr. Sandal

With Ron's departure from the Board and Howard's term starting in July, we currently have a vacancy on the Investment Committee and the Audit Committee and the Board needs to consider its committee membership. Statute requires three members appointed by PERS must be from the elected members to the Board (refer below).

1. The North Dakota state investment board consists of the governor, the state treasurer, the commissioner of university and school lands, the director of workforce safety and insurance, the insurance commissioner, three members of the teachers fund for retirement board or the board's designees who need not be members of the fund as selected by that board, and three of the elected members of the public employees retirement system board as selected by that board. The director o workforce safety and insurance may appoint a designee, subject to approval by the workforce safety and insurance board of directors, to attend the meetings participate, and vote when the director is unable to attend. The teachers' fund fo retirement board may appoint an alternate designee with full voting privileges to attend meetings of the state investment board when a selected member is unable to attend. The public employees retirement system board may appoint an alternate designee with full voting privileges from the public employees retirement system board to attend meetings of the state investment board when a selected member is unable to attend. The members of the state investment board, except elected and appointed officials and the director of workforce safety and insurance or the director's designee, are entitled to receive as compensation sixty-two dollars and fifty cents per day and necessary mileage and travel expenses as provided in sections 44-08-04 and 54-06-09 for attending meetings of the state investment board.

Please note this provision will be changing on August 1 to allow the Board to appoint one of its nonelected members to the SIB as well

<u>Board Action Requested</u>
To appoint a Board member to serve on the Audit Committee and the Investment Committee.

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Memorandum

TO: PERS Board

FROM: Sparb

DATE: July 9, 2009

SUBJECT: Proposals for Experience Study and OPEB analysis

PERS recently issued an RFP for Experience Study for the PERS and HP retirement plans. In addition the RFP was also for doing the OPEB analysis. Attachment #1 is provided for your reference and is a copy of the RFP. We had five firms respond to the RFP and they were:

1. Segal (did not submit on the OPEB effort)
2. Aon
3. Van Iwaarden
4. Gabriel Roeder Smith (GRS)
5. Gallagher Benefit Services (GBS)

Attachment #2 is a copy of the rating sheet. I, Deb, Bryan and Kathy rated the RFP's. We did not see the pricing information until we had completed our rating. Attachment #3 is a response from a firm that did not bid.

You will note the following relating to the Experience Study:

1. Van Iwaarden received the highest number of total points (followed by GRS and Segal).
    a. They were the lowest bidder so they received the full 30 points.
    b. They were third in terms of point for technical understanding (GRS was 1st followed by Segal).
    c. They were third in product delivery (GRS was 1st followed by GBS).
    d. They were last in ratings for qualification and staffing (GRS was 1st followed by AON and Segal)
    e. Their high rating was primarily the result of their pricing.

2. Van Iwaarden has the second highest number of hours proposed.
3. All the firms followed the required format which would increase the points for all by 10.
4. Only Van Iwaarden included a signed agreement in their response which means they would get 10 more points.
5. PERS staff is going to be following up with some additional questions for Van Iwaarden and we will present our final conclusion and recommendation at the Board meeting.

OPEB Study:

1. Van Iwaaden has the most points (followed by GBS and Aon).
2. Van Iwaaden has the lowest overall cost.
3. In terms of Technical Understanding, GBS had the most points followed by Aon and Van Iwaaden.
4. For qualifications and product delivery GRS and GBS tied for most points followed by Aon and Van Iwaaden.
5. Staff recommendation would be to retain Van Iwaaden since they are the lowest cost and have the most overall points.

Experience Study	VanIWaa	AON	Segal	GRS	GBS
General					
Required Format	10	10	10	10	10
1. Firm Demographics					
4. Firm Description					
Signed Agreement	10	0	0	0	0
Retirement					
Technical Understanding	28.5	23.75	28.75	30	27.25
Product Delivery	8	7.25	7.25	9.75	8.125
2. Approach to Analysis					
10. Previous Experience Study					
Qualification & Staffing	24.25	28.75	28.25	30	25.25
5. Actuaries & Consultants & Staff					
6. Computer Equipment					
7. Staffing Statement					
8. Specific & Unique Qualifications					
9. Service Office					
11. Public Sector Experience					
12. Client References					
13. Actuary Resumes/Hours					
14. Other Staff Resumes/Hours					
15. Identify Subcontractors					
Price $					
Experience Study	$19,900	$31,000	$27,000	$34,900	$27,400
Hours	131	101	84	135	118
Price	30.0	19.3	22.1	17.1	21.8
TOTAL POINTS	90.8	79.0	86.4	86.9	82.4

To: Mr. Sparb Collins, Executive Director

North Dakota Public Employees Retirement System

RE: RFP for Experience Study and Retiree Health Valuation

Dear Sparb:

I am writing to inform you that we have decided not to submit a proposal for the services requested in the above referenced RFP. It is our opinion that the actuary currently serving the System is typically the best positioned to perform the requested projects. For example, in order to fully complete the experience study to our satisfaction, the project would require replicating the most recent valuation in order to assess how the current and recommended set of assumptions and methods work together and to accurately measure the impact on valuation results of recommended changes. Therefore, we do not feel that we can be competitive on price with the current actuary and price is a significant factor in the evaluation of proposals. Although we decline to respond to this RFP, we hope to be considered in any future requests for proposals covering the actuarial valuation and consulting service for pension and OPEB. Tom, Ed and I would like to wish you all the best. If you have any questions, please feel free to contact us.

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Memorandum

TO: PERS Board

FROM: PERS Investment Committee

DATE: July 9, 2009

SUBJECT: Request for Proposals Schedule

This next year is going to be an extremely busy one with many important decisions coming before the Board relating to implementation of our legislation, developing a funding plan for our retirement programs, determining the future direction of our wellness program, conducting our experience review and developing our legislative agenda. In addition to all of this, we also have to do our six year bids for our defined contribution/deferred compensation vendor (presently Fidelity), our group insurance consultant (presently GBS), our retirement consultant (presently Segal) and go out for bid on the group insurance plan (BCBS and Ameritas). In order to make all this go as smoothly as possible, it is important to look ahead and try to lay some timelines for all of this to happen. Attached is a first draft (those in bold relate to the defined contribution/deferred compensation effort, those in italic relate to the group insurance activities and those in regular type relate to the retirement consultant).

Defined Contribution/Deferred Compensation Effort

This effort would start in August. Last time we went to bid we hired a consultant to assist in drafting the RFP, issuing the RFP, reviewing proposals, interviewing vendors and with implementation. We are proposing the same approach this time and with your approval, we would develop the RFP for the consultant in August, issue it after the Board meeting and retain the firm at the October meeting. However, if after reviewing the proposals, the Board wanted to interview the top three vendors, we could have a special meeting in late October.

The next steps would be for the newly hired consultant to develop the RFP for the defined contribution/deferred compensation vendor and have it ready to be issued after the December PERS Board meeting. In March/April we would review the responses, interview the top 3 finalists and select a vendor. To accommodate this schedule, I am proposing that we move the regular March meeting from the 18th to the 25th and that we have a special meeting on April 5 to interview the finalists. This would leave us the remainder of April, May and June to transition to a new vendor if Fidelity is not selected and up to one month for delays in the schedule or other contingencies.

Group Insurance Effort

The next major effort is the group insurance renewals including the health plan and vision plan (in the timeline these efforts are in italics). Here again we have traditionally used our group insurance consultant to develop the RFP, review the RFP, assist in the interviews and do other required actuarial work. Our contract with GBS expires in June of 2010. Therefore, we need to go to bid on this effort. I am proposing in the above timeline that we start this effort this fall with the goal of retaining our new group insurance consultant by January of 2010 with the contract starting immediately thereafter (GBS would continue with the day to day consulting until June of 2010). That consultant could then begin work on the RFP for the group health insurance with the goal of issuing it in June of 2010 with responses for your review in August. We must lock the group insurance premium rate down by September so we can forward it to the Governor. By hiring our group insurance consultant for 2010-2016 in January, we can be assured that we have the same consultant working on all efforts relating to the bid for the group health plan.

This schedule would allow us up to 2 months for delays or other contingencies.

Retirement Consultant

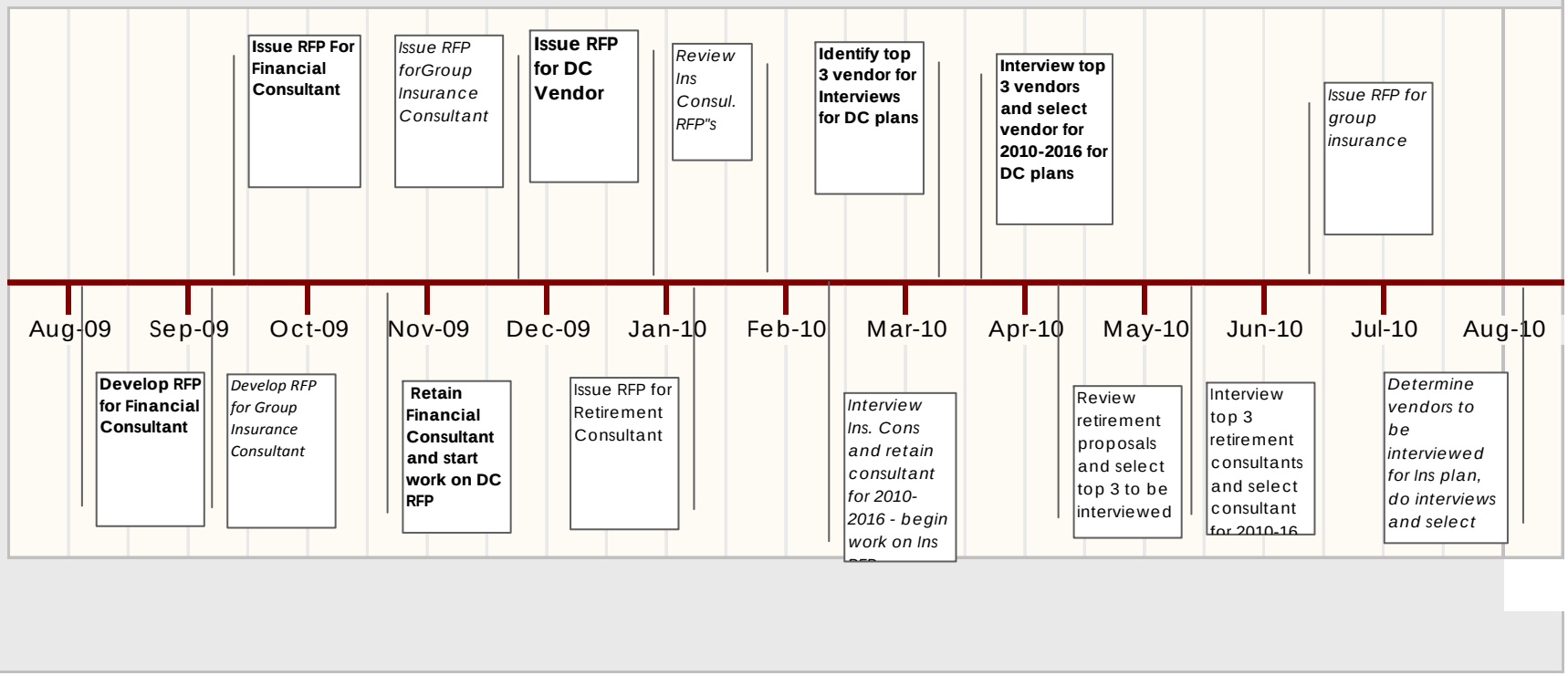
The last major RFP efforts relates to the retirement consultant. Presently Segal is the consultant and our six year contract with them expires in June of 2010. The above schedule anticipates that this effort would start with issuing the RFP in January, reviewing the proposals in March and interviewing the top 3 finalists and selecting the new consultant in April. As laid out, this schedule would allow up to two months for delays in the schedule or other contingencies.

Board Action Requested

Board action is requested to approve the above time line and process.

Attachment

RFP Schedule



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MEMORANDUM

TO: NDPERS Board

FROM: Jim Smrcka

DATE: July 8, 2009

SUBJECT: **Consultant Fees**

Attached is a report showing the consulting, investment and administrative fees paid during the quarter ended June 30, 2009 Please let me know if you have any questions on the report.

Attachment

North Dakota Public Employees Retirement System
Consulting/Investment/Administrative Fees
For the Quarter Ended June 30, 2009

	Program/Project	Fee Type	Apr-09	May-09	Jun-09	Fees Paid During The Quarter	Fees Paid Year-To-Date
Actuary/Consulting Fees:							
Gallagher Benefit Services, Inc	Insurance	Fixed Fee				-	-
Gallagher Benefit Services, Inc	Ongoing consulting	Time charges	-	1,738	-	1,738	6,361
Gallagher Benefit Services, Inc	Travel Expenses	Actual	-	-	-	-	-
Cem Benchmarking Inc	Cost effectiveness ranking charts		-	-	-	-	5,000
LR Wechsler, LTD	IT Project	Fixed Fee	43,843	14,578	11,259	69,680	159,549
LR Wechsler, LTD	Travel Expenses	Actual	3,317	4,647	3,720	11,684	23,039
Sagitec Solutions LLC	PERSLINK Project		25,477	-	-	25,477	555,453
Sagitec Solutions LLC	Back file conversion	Actual	-	-	-	-	43,534
Sagitec Solutions LLC	Enhancements	Actual	21,384			21,384	39,204
UND	Diabetes management	consulting	10,081			10,081	10,081
Gabriel Roeder Smith & Company				-	-	-	1,100
Mid Dakota Clinic	Retirement Disability	Time charges	250	550	550	1,350	2,450
The Segal Company	Retirement (DB)	Fixed Fee	13,388	-	-	13,388	26,775
The Segal Company	Ret Health Credit	Fixed Fee	2,475	-	-	2,475	4,950
The Segal Company	FlexComp	Fixed Fee	2,700	-	-	2,700	5,400
The Segal Company	Job Service	Fixed Fee	3,600	-	-	3,600	7,200
The Segal Company	QDRO/Compliance	Time charges	1,639	-	-	1,639	14,190
The Segal Company	Legislation	Time charges	-	1,401	-	1,401	11,490
The Segal Company	Retirement (DC)	Time charges	-	-	-	-	-
The Segal Company	Deferred Comp	Time charges	-	420	-	420	911
The Segal Company	Travel Expenses	Actual	-	-	-	-	-
			$ 128,154	$ 23,335	$ 15,529	$ 167,017	$ 916,687
Audit Fees:							
Brady Martz	Annual audit	Fixed Fee				$ -	$ -
Brady Martz	Amended 1099R's					$ -	$ 497
Legal Fees:							
ICEMILLER llp	IT Project	Time charges	-	-	-	-	$ -
ND Attorney General	Administrative	Time charges	1,932	2,184	1,387	5,503	$ 5,503
Calhoun Law Group	Administrative	Time charges	-	-	-	-	$ -
Investment Fees:							
SIB - Investment Fees	Retirement (DB)	% Allocation	512,279	566,029	*	1,078,308	2,798,168
SIB - Investment Fees	Ret Health Credit	% Allocation	8,541	562	*	9,103	32,209
SIB - Investment Fees	Insurance	% Allocation	162	44	*	206	469
SIB - Administrative Fees	Retirement (DB)	% Allocation	21,506	16,952	*	38,458	81,658
						$ 1,126,075	$ 2,912,504
Administrative Fee:							
Blue Cross Blue Shield	Health Plan	Fixed fee	751,417	751,327	*	1,502,744	$ 3,752,450

*** fees not yet available**